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Key learning outcomes

- To develop an enhanced understanding of complex abuse related trauma, with a particular focus on its effects on brain functioning
- To develop a clear understanding of the manifestations of abuse related trauma on the general functioning of a child or young person
- To be able to assess the impacts of abuse related trauma on the child or young person
- To gain a knowledge of the strategies and activities that we may use in the classroom to assist a child or young person manage the impacts of abuse related trauma

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Key messages

- Trauma can undermine children's ability to learn, form relationships, and function.
- Schools are significant communities for children, and teachers.
- Teachers are significant role models in these communities and must be given the supports they need to address trauma's impact on learning.
- Otherwise, many children will be unable to achieve their academic and life potential.
- Trauma-sensitive school environments benefit all children.
- Those whose trauma history is known, those whose trauma isn't known, and those impacted by their traumatized classmates.
- Together, we can ensure that all children will be able to achieve at their highest levels

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SPACE

Schools can respond effectively to the needs of traumatised children and young people, using the five key dimensions of the acronym **SPACE**.

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Trauma Informed Practice in Schools

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Defining trauma

Any single, ongoing or cumulative experience which:

- is a response to a **perceived threat**, usually to survival
- **overwhelms** our capacity to cope
- feels/is **outside our control**
- often evokes a **physiological** and **psychological** set of responses based on fear or avoidance

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SECTION 1-1

A summary of how complex trauma affects the developing brain

Complex developmental trauma reduces the capacity of the thinking part of children's brains to shape the way they react to challenges in their environments. As a result, children and young people appear to behave impulsively and sometimes inappropriately, without knowing why. They are also not able to easily influence their feelings when faced with perceived threat or increases in their experience of stress.

It impairs the growth and activity of the bridge between the left and right hemispheres of the brain. As a result, children find it difficult to know, name and access their feelings. They can find it difficult to read social cues and respond in social exchanges.

It increases children's base arousal level such that they live in a constant state of vigilance and heightened alertness. As a result, traumatised children and young people are easily triggered by seemingly minor issues. Their responses are often seen as 'out of the blue' or 'over-reactions' to situations.

Complex developmental trauma locks down children's capacity to adapt to change in their environment. They are more likely to use fixed and repetitive behavioural routines in situations where they feel distress and uneasy. These routines involve movements and actions that feel familiar and comforting to them – even if they are destructive or harmful to others.

These children and young people lack the adaptability and flexibility necessary to respond differentially to varying situations and contexts. They have a limited range of coping strategies. Whilst these strategies may have been effective in assisting them to survive in unsafe situations, they are often inappropriate responses in situations where there is an absence of risk.

Traumatised children find it difficult to make meaning from their experiences. They have few or no effective internal maps to guide their actions. As a result, they react rather than respond.

Their beliefs about themselves are determined by the very people who violate them. They hold onto these beliefs about relationships which are not helpful to them in their communication with peers and other adults in the classroom.

They can find it difficult to see adults as supportive. They are cautious about being hurt and are more likely to stay closed to the development of new connections or relationships.

They do not easily understand or engage with consequential learning. Their brains are so over-activated that they are able to take in very little and not learn new information easily.

In particular, their memory systems continue to remain under stress. They fail to consolidate new learning. Their working memory for even the easiest set of instructions can be severely compromised.

Traumatised children and young people experience the present with little reference to their past, even though their behaviour, feelings and physiology are affected by their experiences of violation. They do not have access to the positive qualities that make them who they are. They have a fractured sense of their own identity. Their future is without plans or a sense of possibility. They perceive threat now and across domains.

Complex developmental trauma locks down children's capacity to adapt to change in their environment.

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Trauma impacts

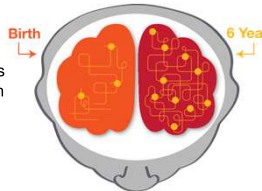
Trauma can impact all elements of children's development: brain, body, memory, learning, behaviour, emotions, relationships.

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Neuronal connections

- Neurons – cells in our brain interact and communicate with other neurons
- The neural system has the ability for one neuron to communicate with up to 10,000 other neurons
- The newborn brain has approximately 100 billion neurons



Neuroplasticity refers to the brain's capacity to:

- Grow new nerve cells
- Strengthen connections between nerve cells
- Sprout new connections between different cells

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Developmental stages of brain maturation

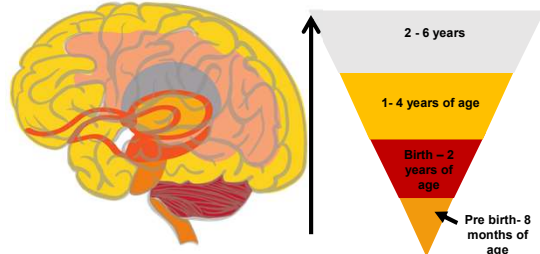


Image source: ©2018 ACF

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Brainstem – survival centre

- Responsible for basic life functions
- First part of our brain to develop & the most developed brain part at birth
- Responsible for our heart beat, breathing, sucking and swallowing, temperature control blood pressure and our sleep cycle




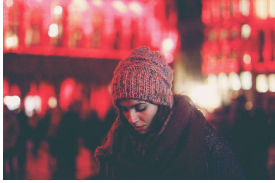
Image source: ©ACF 2020

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The brain stem under stress and trauma

- May experience fast or slower heart rate
- Shortness of breath or breathing difficulties
- Sleep disturbances and unsettledness
- Sucking and swallowing and digestion difficulties
- May feel hot or cold or not notice changes in temperature



What do you notice?

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Cerebellum – movement & coordination centre

- Has a key role in posture and balance
- Helps us to know where our body is in space- spatial awareness
- Links to prefrontal cortex
- Responsible for our voluntary movements such as walking and writing and fine and gross motor skills
- Plays a role in **physical and mental** coordination







Image source: ©ACF 2020

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The cerebellum under stress and trauma

- Difficulties coordinating cognitive processes such as planning & working memory
- Difficulty in maintaining posture & balance
- Inability to undertake tasks that require balance
- Lack of awareness of their body in space
- Difficulty with voluntary movement tasks – walking or writing



What do you notice and what can you do?

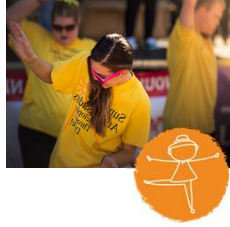
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Strategies for transforming – brainstem & cerebellum:

RHYTHM, BREATH, MOVEMENT

- Include soothing and calming activities; safe containment; breath based activities
- Movement based activities
 - include activities that have a rhythmic, repetitive element
 - include activities that have a balancing element & gross & fine motor skills
- Conduct a sensory audit – ie: is it too hot or too cold, too noisy?
- Include proprioceptive and interoceptive awareness and activities



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Diencephalon – sorting and sending centre

- Develops mainly after birth
- Sorts out “messages” coming into the brain and sends them out to other parts of the brain
- Uses hormones to send signals to body




Image source: ©ACF 2020

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The diencephalon under stress and trauma

- Student becomes overwhelmed and cannot sort the information
- Student is unable to send information to the memory and thinking parts of the brain – that pathway shuts down
- Diencephalon alerts the amygdala which sets of a sensory information response sequence



What do you notice?

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Strategies for transforming – diencephalon

- Conduct a sensory audit
- Provide calm, positive sensory experiences
- Provide regular and predictable brain and body breaks
- Provide routine and prompts to support body systems and tuning in




What might help during transitions, beginnings and endings?

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Limbic lobe - emotion and memory centre

- helps us attach an emotion to an experience or memory
- particularly involved with the emotions
- heavily involved in attachment processes
- develops mainly after birth
- two important brain parts – the amygdala and the hippocampus are in this part of the brain




What do you notice?

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Building Capacity – Limbic System

1. Co-regulating strong emotions
Validate emotion, cues for proximity/space, engage senses, prosody, rhythm & breathing
2. Enhancing positive emotions
May need help to name & express
3. Promoting emotional literacy
Teach during moments of calm



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Amygdala

- Alarm centre - the 'smoke detector' of the brain
- 'Fires' when a threat is detected – triggers a series of brain and body responses
- Stores (& generalises) implicit memories relating to fear/threat




Image source: GACF2020

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The amygdala under stress and trauma

- Can be over active or under active
- Can evoke reminders and flashbacks of the trauma (awakenings)
- Will have difficulty in emotional regulation
- Will have difficulty in reading facial expressions
- Constantly 'firing' – can hijack the cortex (thinking goes offline)





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Strategies for transforming – Amygdala

- Manage own reactions (stay calm & present)
- Don't rely on reason/thinking to reduce an escalation
- Regular outbreath activities
- Provide opportunities for rest and recovery
- Environmental audit (noise, smell, colour, person, situation).



Re-entry to the classroom should be a safe and positive transition whenever possible.

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Hippocampus

- explicit memory centre
- provides context to memories
- provides consolidation of information from short term memory to long term memory
- memory puzzle sorting centre





Image source: ©ACF 2020

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The hippocampus under stress and trauma

- Reduction of hippocampal volume up to 25% as a result of high levels of cortisol
- Can't place memories in time or place – flooding & flashbacks
- Working memory, retention and recall (retrieval) capacity is severely impacted
- Narrative/autobiographical memory is affected




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Strategies for transforming – Hippocampus

- Repetition
- Reminders
- Review
- Reinforce



Calming the brainstem, quietening the amygdala and boosting the cerebellum will all help the hippocampus to function more effectively

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The Prefrontal Cortex- executive function centre

- Self awareness and self reflection
- Reasoning and judgement
- Foresight and anticipation
- Focusing and sustaining attention
- Planning organising and prioritising
- decision making
- Enthusiasm, motivation and persistence
- Impulse control
- Working memory




Image source: ©2018 ACF

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Cortical areas under stress and trauma

Unable to:

- use foresight and anticipation, focus or sustain attention
- plan, organise or prioritise or make decisions well
- reflect or have self-awareness
- be enthusiastic, motivated or persist with activities
- use impulse control



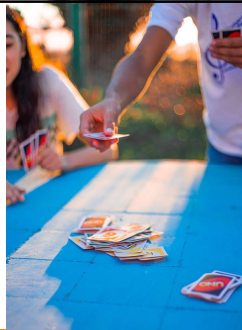
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Strategies for transforming – cortical areas

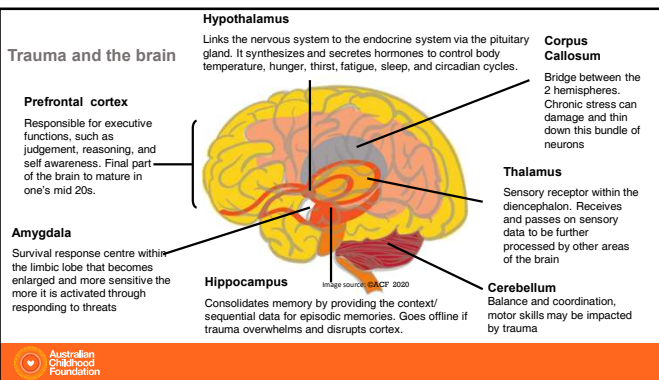
Safety and stability are essential pre-requisites for cortical access

- Problem solving activities and strategies
- Support to map and plan activities
- Games - card games – boards games, strategy games
- Voluntary movement activities – table top drumming, clapping etc
- Thinking and choice games – “Would you rather?”
- Mindfulness activities



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Strategies for transforming

Brain area	Function	Activity ideas
Brainstem & Diencephalon	Basic survival & sensory processing	Pacification or stimulation. Activities in the child's preferred sensory modality
Cerebellum	Coordination of movement	Using music, rhyme and movement activities
Limbic	Emotional processing	Building relational connection through plays, animals, games
Cortex	Thinking processes	Linking experiences and sensations to words and descriptions
Prefrontal cortex	Analytical and abstract thinking	Challenges and safe risk taking activities

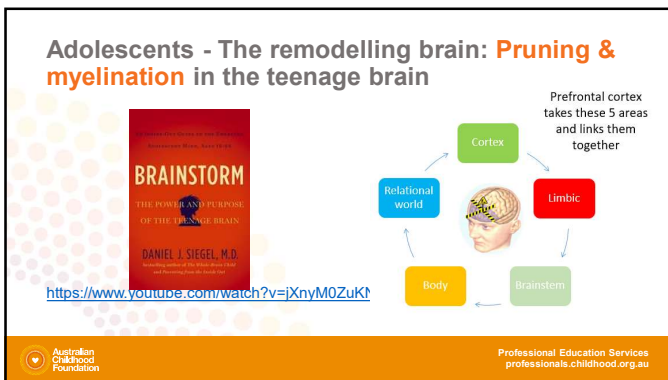
Image source: ©2018 ACF



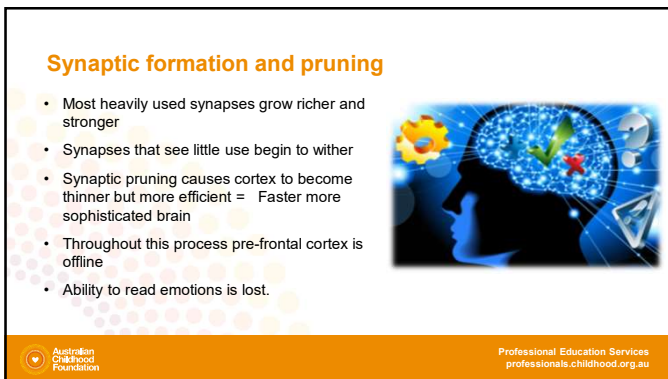
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Risk taking and impulse control

Heightened sensation seeking + Under-developed self-regulatory control = Increased RISK TAKING

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Trauma and the Body

- Neuroception
- Polyvagal Theory
- Window of Tolerance
- Creating Safety

Neuroception: Cues of risk and safety are continually monitored by our nervous system (Porges, 2015).

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Polyvagal theory and protective responses

by Stephen Porges

Behavioural Functions	Body Functions
Social Engagement Soothing and calming Indicates safety	• Lowers or raises vocalisation pitch • Regulates middle ear muscles to perceive human voice • Changes facial expressivity • Head turning • Tears and eyelids • Slows or speeds heart rate
Mobilisation Fight or Flight Active Freeze Moderate or extreme danger	• Hyper arousal • Increases heart rate • Sweat increases • Inhibits gastrointestinal function • Narrowing blood vessels - to slow blood flow to extremities • Release of adrenaline
Immobilisation Collapse or submission Death feigning Increased pain threshold Conserves metabolic resources Life threatening situations	• Hypo - arousal • Slows heart rate • Constricts bronchi • Stimulates gastrointestinal function

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The social engagement system

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An introduction to the Polyvagal theory and neuroception

Cues of risk and safety are continually monitored by our nervous system.

“Before we can engage in social behaviour and learning we must first feel safe.”
 (Porges, 2015, p.115).

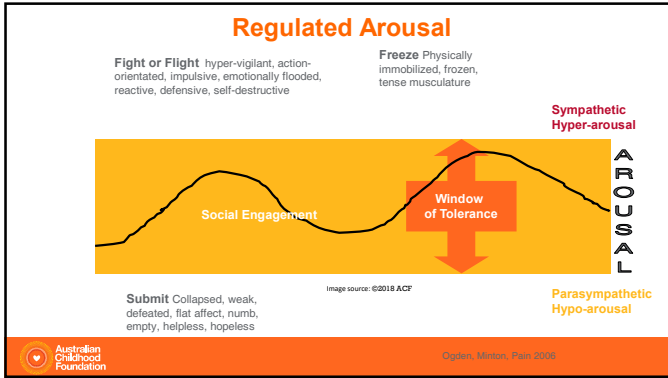
Parasympathetic System

- Contracts pupils
- Stimulates flow of saliva
- Contracts bronchi
- Slows heartbeat
- Stimulates peristalsis and secretion
- Stimulates bile release
- Contracts bladder

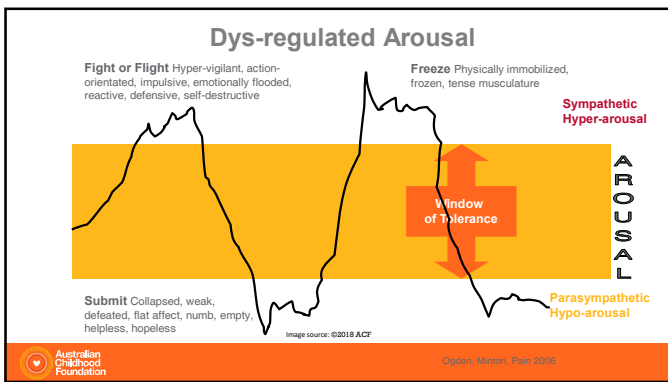
<http://lewisinstitute.com.au/wp-content/uploads/2017/08/img-stragepie2.jpg>

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Overshooting your Window of Tolerance:

- Upset and hyped up
- Angry and agitated
- Frustrated
- Heart beating fast
- Tense and can't think clearly
- Unable to regulate your emotions

Within your Window of Tolerance:

- Feeling safe, calm and peaceful
- Happy and able to think clearly
- Ready to learn
- Settled and content
- Mindful and able to regulate your emotions

Undershooting your Window of Tolerance:

- Sad and tired
- Unmotivated with no energy
- Feel empty and withdrawn
- Don't want to listen, talk or play
- Can't think about learning

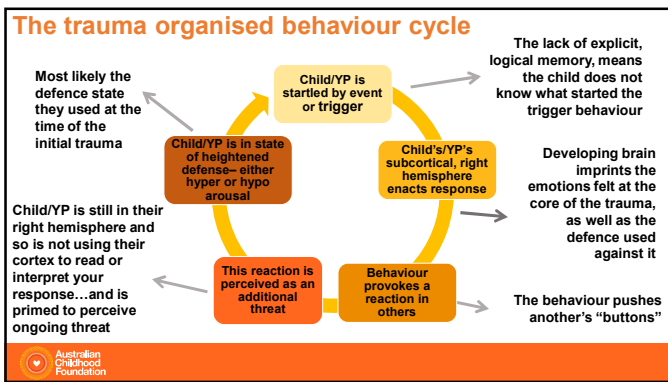
Making Space for Learning – Action Research Project - St Thomas More School, Elizabeth Park, S.A.

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Behavioural – narratives of trauma

- Behaviour tells a story!
- Traumatized children's behaviour can be difficult and complex for parents, teachers and carers to understand, manage and shape
- However, it is functional and almost always makes sense given their specific experiences of trauma
- Children's behaviour is the manifestation of the impacts of trauma outlined in the previous sections

Sometimes when we are angry, there are other emotions under the surface

Icebergs are giant floating pieces of ice found in the coldest parts of the ocean. What you can see from above is just a tiny part. Most of the iceberg is hidden under the surface.

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Trauma and behaviour – adaptive to maladaptive

Trauma based behaviour is functional at the time in which it develops as a response to threat.

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Common themes

- “attention seeking” needing/ seeking connection
- “manipulative” inability to trust
- “Inattentive” worried and preoccupied
- “disruptive” difficulty asking for help

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Avoidant behaviour & shame

<p>Avoidant behaviour -</p> <ul style="list-style-type: none"> • Feelings of social inhibition & creation of social isolation • Inadequacy & inferiority (low self esteem) • Sensitive to negative criticism & ridicule • Humiliated, Rejected 	<p>Shame -</p> <ul style="list-style-type: none"> • Being flawed and inadequate • Unlovable & unworthy • Defective and undesirable • Hopelessness • Helplessness • Shut down 	
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The shield against shame

LIE **BLAME**

MINIMISE **RAGE**

The Shield of Shame

Blame
"it was his fault!"

Deny
"I never did anything!"

Minimise
"He wasn't really hurt"

Rage
"You always blame me for everything!!"

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Empathy Why is empathy important? How do we learn empathy?

Shorts

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Empathy Why is empathy important? How do we learn empathy?

Approaching Life with Empathy

headspace

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Complex trauma in adolescence

- *Anxiety*
- Depression
- *Dissociation & Avoidance*
- Relational & affect regulation disturbance
- Cognitive distortions
- Somatization
- Externalising behaviours such as: self-mutilation & violence
- Sexual disturbance




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Complex Trauma in Adolescence

- Substance abuse
- Eating disorders
- Susceptibility to re-victimisation
- Traumatic bereavement associated with loss of family members and significant other attachment figures
- Sleep disturbance
- Danger – not recognising or over-recognising
- Defiant behaviours
- Anger



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Multi-tiered Service Delivery Model

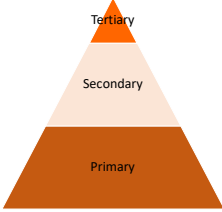
Provide effective practices for all students, and intensive support to those who need it

TERTIARY TIER: individualised interventions for students who need more intensive support – referral to external services, wrap-around support, tailored support plans etc.

SECONDARY TIER: identifying 'at-risk' students in need of targeted small group intervention – psycho-education, etc

PRIMARY TIER: preventive measures – system-wide changes to promote a safe learning environment


Phifer & Hull (2016)



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Brene Brown – Daring Classrooms



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Reframing Behaviour Support Plans

Consider the **function behind the behaviour** – what is the unmet need? What alternatives could we offer the child to meet this need in a different way?

- I. Can the behaviour be understood as a **fight, flight, freeze or withdrawal** response?
- II. What **stressors or situations** do we think trigger these behaviours, and which ones can we do something about?
- III. What **skills** can we help the child/young person to develop, to support them in reducing these behaviours?

Don't rely on consequences to promote behaviour change



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Trauma and Memory Trauma and Emotions Trauma and Relationships



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How Trauma Impacts Four Different Types of Memory

LONG TERM MEMORY		SHORT TERM MEMORY	
DECLARATIVE MEMORY	SPECIFIC MEMORY	EMOTIONAL MEMORY	PROCEDURAL MEMORY
<p>What it is: The memory of general knowledge and facts.</p> <p>Example: You remember what a bicycle is.</p> 	<p>What it is: The autobiographical memory of an event or experience, including the who, what, and where.</p> <p>Example: You remember who was there and what event you were at when you fell off your bicycle in front of a crowd.</p> 	<p>What it is: The memory of the emotions you felt during an experience.</p> <p>Example: When a crowd of people or animals greets you the next time you see your bicycle after the fall.</p> 	<p>What it is: The memory of how to perform a complex task without consciously thinking about how to do it.</p> <p>Example: You can ride a bicycle automatically, without having to stop and recall how to do it.</p> 
<p>How Trauma Can Affect It: Trauma can prevent declarative memory from being stored in the hippocampus and other parts of the brain from combining to form a specific memory.</p>  <p>Related Brain Area: The hippocampus and other parts of the brain collect information from different brain areas to create episodic memory.</p>	<p>How Trauma Can Affect It: Trauma can challenge specific memory and fragment the sequence of events.</p>  <p>Related Brain Area: The hippocampus is responsible for creating and holding specific memory.</p>	<p>How Trauma Can Affect It: After having a power outage get triggered and causing a panic situation, later without context.</p>  <p>Related Brain Area: The amygdala plays a key role in supporting memory for emotionally charged experiences.</p>	<p>How Trauma Can Affect It: Trauma can change the way of processing memory by causing a person to get stuck in a continuously going on state which could lead to loss of motor functions.</p>  <p>Related Brain Area: The striatum is associated with producing procedural memory and creating new habits.</p>


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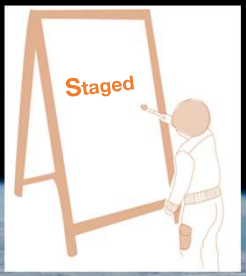
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- The knowledge base about the maturation of the brain highlights that development is sequential by nature.
- Sophisticated functions of the brain – body system only emerge after basic functions have been developed and been consolidated with rehearsal and practice.
- Strategies aimed at resourcing traumatised young people need to follow this staged pattern of conceptualisation and implementation for them to succeed.

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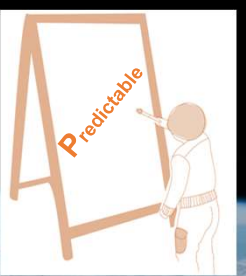
What might staged look like in practice?

- View student through trauma informed lens
- Identify developmental stages
- Build on strengths
- Create classroom activities that build neurobiology and neurophysiology for all students



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    graph TD
      A[Changes to the routines are a source of stress to children and young people who have experienced trauma] --> B[Brain and body are constantly hyperaroused]
      B --> C[Predictability in their relationships and environment deactivate the stress systems]
      C --> D[This then promotes flexibility and adaptability]
      D --> A
  
```

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What might predictability look like in practice?

- For students
- For families
- For staff
- Systemically

relationships	physical environment
routines	instructions
learning tasks	behavioural expectations

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Predictability-Supporting Regulation

Routine and cueing are your superpowers because they reduce the number of surprises a student must manage!

- Provide cues before transitions
- Simple, straightforward instructions
- Make routines explicit
- Cues can be multi-sensory

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- Traumatized children and young people rely on a limited set of behavioural routines to respond to the challenges of their context.
- These routines are sourced in the history of their physiological reaction to trauma and the experiences of relationships through which these reactions were interpreted and responded to.
- Strategies which promote adaptability in children and young people are those which are able to maintain multiple meanings for behaviour and remain open to multiple options for interventions.

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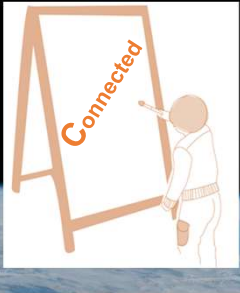
What might adaptive look like in practice?

- See the needs beneath the behaviour
- Utilise strengths
- Psychoeducation in classroom
- Relationship, repetition, rhythm
- Use PACE
 - Playfulness
 - Acceptance
 - Curiosity
 - Empathy



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Connected

Traumatised children and y/people develop insecure and unstable templates for forming and being in relationships.

They have distorted or confusing internal maps to help them navigate intimacy.

They avoid engaging fully in relationships for fear of being hurt or rejected again.

Strategies to support traumatised children and young people emphasise relationships with safe and consistent adults and peers as the foundation for change.

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What might connected look like in practice?

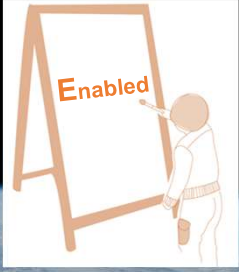
- The student feels safe and connected
- Co-regulation occurs
- A feeling of connectedness is what you get when you feel like you belong in a group, when you are with others of your
- Mirror neurons –eye contact
- Attuned listening.

"Where attention goes, neural firing flows, and neural connection grows."
Seigel 2018.



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- Traumatized young people find the process of understanding themselves difficult.
- They are challenged in their capacity to identify their feelings, understand them and communicate them to others.
- They struggle to piece together a coherent narrative about their qualities, their attributes and their talents.
- Strategies for responding to traumatized children and y/ people in the school context will enable them to make meaning

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What might enabled look like in practice?

- Creating safety
- Understand triggers
- Map behaviours
- Classroom approaches for individuals
- Flight, Fight, Active Freeze or Submit responses are assisted to enable learning.



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Making SPACE for Learning – Site Audit Tool

This audit tool can be used to evaluate the policies and initiatives of a school that receive and equip different levels of the school structure to undertake trauma informed practice. In the following table, list strategies, policies or other processes currently undertaken that support traumatized students at your school.

	Whole Site	Staff	Classroom / Group	Small Group	Individual Student / Child
S Support					
P Predictable					
A Active					
C Connected					
E Enabled					

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To seek, To see, To Respond

Small, everyday moments of positivity can build to something truly reparative, given enough repetitions.



- Marina Dickson#childtrauma2016

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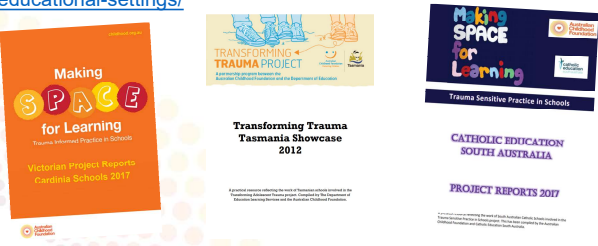
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Showcase booklets
<https://professionals.childhood.org.au/building-capacity-in-educational-settings/>



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