



Discussion Paper 11

Exploring SMART PRACTICE with adolescents



Introduction

The intent of this paper is to generate discussion. It poses a series of questions to further enhance reader responses to understanding and working with traumatized adolescents. These discussions can take place in a range of settings including staff meetings, year level meetings or during individual reflective and training and development opportunities.

This discussion paper explores the application of the SMART PRACTICE framework with adolescents. It begins by considering some of the key messages of a neurobiological perspective regarding adolescent development and then looks at how this developmental process may be influenced by experiences of relational or abuse related trauma. It then used the SMART PRACTICE framework as a basis for specific strategy ideas. This paper gives readers the opportunity to reflect on their current application of the framework, suggested strategies and provide their own ideas and applications to build their practice repertoire specifically with young people.



Section 1: Adolescent development and the impacts of trauma

Adolescent brain development

As with all brain development processes, we now know much more than we did in the past and this is particularly true of the adolescent brain. It is clearly demonstrated that the architecture and functioning of an adolescent brain differs from that of a child or an adult and affects their day to day experience.

One key area is understanding synaptic pruning and myelination. In childhood there is a period of synaptic excess in the brain- the brain is building synaptic, or neuronal, connections at a great rate. It is suggested that the brain will develop some 50% more than will be preserved in adulthood. The process of reviewing this myriad of connections is undertaken particularly in adolescence.

During this critical review period, a young person's experience determines which of these connections will be preserved, through "pruning" of the least useful connections and strengthening (myelination) of the useful ones. This process is the brain's way of setting itself up for your future. The brain works out what it thinks you will want to do in the future by taking note of what you are doing now. In this way, each young person's brain becomes tuned to meet the challenges of her or his particular environment.

The other key task of adolescent brain development is the increasing of functionality of the pre-frontal cortex. This part of the brain is the most complex part of the most complex part of the human brain (the cortex). It is suggested that the pre-frontal cortex is responsible for:

- Focussing attention
- Working memory (the memory we use to make sense of and complete tasks in the here and now)
- Social cognition (understanding the minds of others)
- Attuned communication
- Self-regulation
- Impulse control
- Response flexibility
- Self awareness
- Judgement and reasoning

Clearly this links directly to what we already understand as the tasks of adolescence. It also helps us to understand why adolescents behave in ways that seem thoughtless and ill-prepared. This is what we see as risk taking behaviour.

Risk taking during adolescence could be thought of as the product of a heightened stimulation seeking system and an immature self-regulatory system that is not yet able to modulate reward-seeking impulses.

Young people use different brain structures to make decisions compared to the ones adults use. We know a fully developed pre-frontal cortex curbs impulses coming from other parts of the brain. It is the structure that has final sign off on how we will react in situations. We also know that a teenager does not have full use of this region as it is under developed. Studies have shown that teenagers use local regions of the brain in responding to some tasks while adults whose brains are more integrated recruit regions from different areas of the brain and have them work together when responding to particular situations.

All of this equally tells us that novelty seeking throughout adolescence is normative and neurobiologically driven and should be provided for.



Impact of trauma on adolescent developmental processes

The experience of relational, complex, trauma will tend to impact on these normative processes of development through adolescence. This is particularly reflected in the impact on the development of the pre-frontal cortex. We know that repeated trauma responses will shut off connections to the cortex, stemming from the sub-cortically based responses, and this can have impacts on cortical development over time.

It is suggested that the outcomes of a poorly developed pre-frontal cortex will result in the following impacts:

- Short attention span
- Impulsivity and increased risk taking
- Procrastination (lack of motivation or internal reward systems)

- Disorganisation (trouble working through long term goals)
- Poor judgement and problem solving
- Over emotional reactions
- Trouble reading facial expressions
- Ill-attuned communication skills

As with all trauma based behaviours it is important to consider the meaning of an adolescent's behaviour. The following points can assist with trying to establish this meaning:

- Adolescents who have experienced trauma may present with regressed behaviours that are related to their trauma histories. We may see what could be described as “developmental injuries”- areas of normative development that have been impacted and need to be revisited.
- Traumatized adolescents often have access to increasingly elaborate and potentially harmful behaviours which may be employed as avoidance and tension reduction strategies such as substance abuse or self harm.
- Adolescence is a stage of increased relational significance with peers and developing romantic interest, and as such it may be a prime time for triggering un-processed relational trauma.
- Adolescence is a time of maturing cortical development and as such reflects a time when adolescents may come to know their trauma in new ways as well as begin connecting things they haven't connected before. Equally, some of those connections may be sub-cortical and, as such, confuse and terrify the young person.



Section 2 Ideas for responding to traumatised adolescents

The ideas for responding stem from the SMART PRACTICE framework discussed throughout the SMART program. It should be acknowledged that many of the strategy ideas discussed for children are equally useful for young people. However, the following suggestions are specific to work with traumatised adolescents.



Predictable

- try to minimise timetable and room changes wherever possible
- provide a visual timetable that is discreet but colourful



Responsive

- utilise restorative justice questions but provide answers rather than continue to ask the questions eg: “This is how the other person felt when this happened...”, “This is the incident we know happened and it happened in this sequence”
- try to build clear and consistent behavioural responses across subjects and teachers



Attuned

- use current music to explore feelings, link words and depth of feeling as well as considering how this helps you to understand how someone is feeling
- access drama based activities to learn about facial expressions and feelings recognition eg: “pass the face”
- utilise emotional tracking measures across the course of the day



Connecting

- build “here and now” activities into the everyday. This will assist young people who may be struggling with trauma triggers to reconnect with the moment. These might include asking the class to focus on one colour in the room, dig their toes into the floor or engage in a mindfulness or breathing technique/exercise.
- make links between physiological responses and emotions through texts, music and videos



Translating

- do a “line of the day” to connect the course of the day, link emotional responses and look for patterns of experience
- use cartoon based activities to build connected stories of understanding about a range of experiences such as social, behavioural or general daily patterns.



Involving

- utilise physical activity or challenge activities to both give a positive experience of heightened arousal and build peer connections.
- understand that traumatised young people may want to watch their peers’ interactions and discussions and not always be in the midst of them (parallel rather than cooperative “play”).
- Incorporate learning about brains, neurobiology and the brain development to assist with understanding behaviours and peer responses.



Calming

- incorporate consistent and repeated calming activities into the day’s schedule, or at least specific classes
- consider the physical environment of the classroom and any indoor communal spaces. Is that environment sensorily soothing?
- utilise dancing, drumming and music to support young people experiencing a calming rhythm on a regular basis. Those in a state of heightened arousal need to have a physiological understanding of the experience of calm before they can access it when asked or told to.



Engaging

- support the young person in eco-mapping activities. This enable the young person to consider the connections they have in their lives and map their level of closeness and supportiveness. A visual map can prove more useful than a list of names.
- as a staff group (whole staff, year level or other group) identify key staff for each identified young person. This person becomes the key contact or key relationship, but not the only one.



Section 3 Questions for reflection or discussion

1. Do you think working with traumatised adolescents is different from working with traumatised children? What do you see as one of the key differences?
2. Does a neurobiological understanding of adolescence enhance your understanding and expectations of young people? Does a neurobiological understanding challenge any of your current knowledge and practice?
3. What is one question that still remains regarding the impact of trauma on young people?
4. What strategies have you used in the past that have been successful in supporting a young person who has experienced trauma?
5. What have you done in the past that has just not been useful/effective? How do you understand that lack of usefulness?