

Trauma Responsive Practice With Families

Mallee Family Services
Feb 23 2024



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The Australian Childhood Foundation acknowledges Aboriginal and Torres Strait Islander peoples as the traditional custodians and owners of this land and waters. We pay our respects to their Elders past and present and to the children who are their leaders of tomorrow. We acknowledge their history and living culture and the many thousands of years in which they have raised their children to be safe and strong.



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The Australian Childhood Foundation



We Help Children Heal

On their own, children do not recover from the devastating impact of abuse, neglect and family violence. They need specialised support to heal. We provide therapeutic services to children.



We Keep Children Safe

We build the ability and confidence of individuals and organisations to protect children. We provide parents with education and support to help them raise happy, safe and loved children.



We Stand Up for Children

We advocate for changes to laws and policies that help to make all children safer. We work to strengthen community attitudes that prioritise the rights of children to love and safe relationships.



We Create Understanding for Children

We educate and support adults who look after and work with traumatised children to be better able to understand and respond to their complex needs.



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Our Education Services

Access our latest offerings:
<https://professionals.childhood.org.au/training-development/>

- Our Education Services co-create and amplify knowledge that changes children's lives for the better, by creating networks of learning in partnership with professionals and organisations working with children and young people.
- Our efforts include:
 - Accessible learning opportunities for professionals: a range of self-paced modules and virtual classrooms covering trauma prevention, relational healing and evidence-based approaches to best practice.
 - Customised organisational education: tailored training packages designed to support ongoing staff development, including Train The Trainer options for long-term success.
 - Accredited training: our unique Graduate Certificate in Developmental Trauma



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Our Safeguarding Services

- Over a decade, Safeguarding Services have partnered with over 300 organisations nationally and internationally to strengthen the capacity of institutions to keep children and young people safe.
- We offer a suite of standard and customised solutions that meet national and state Child Safe Standards, aimed at creating organisational culture change.
- We draw on best practice from the Foundation's experience and our network of partners, and evidence, including our recent Safeguarding Evaluation by the Centre for Social Impact.

Access our latest offerings:
<https://professionals.childhood.org.au/safeguarding-children-services/>

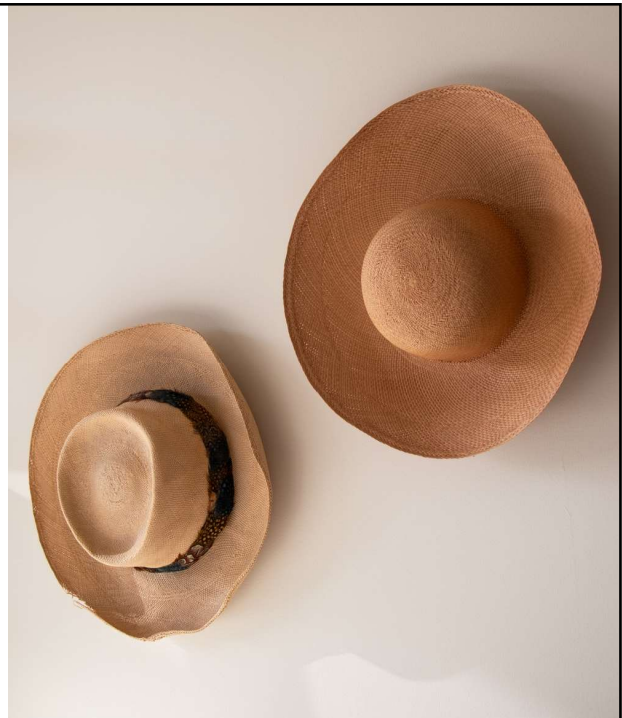


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Safety

The content of this training can evoke strong emotions and may stir up personal experiences of trauma.

Please be mindful of your own wellbeing during this training and if you need support please ask the facilitator.



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Housekeeping

-Breaks & Nourishment

-Confidentiality

-Adult Learning Environment



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Learning Outcomes:

Strengthen your understanding of the broad issues vulnerable children face within the context of culture, relationship, environment and experience.

Explore the difficulties in engaging and reengaging marginalised parents and carers who have also experienced complex trauma and explore the long-term implications of their experiences.

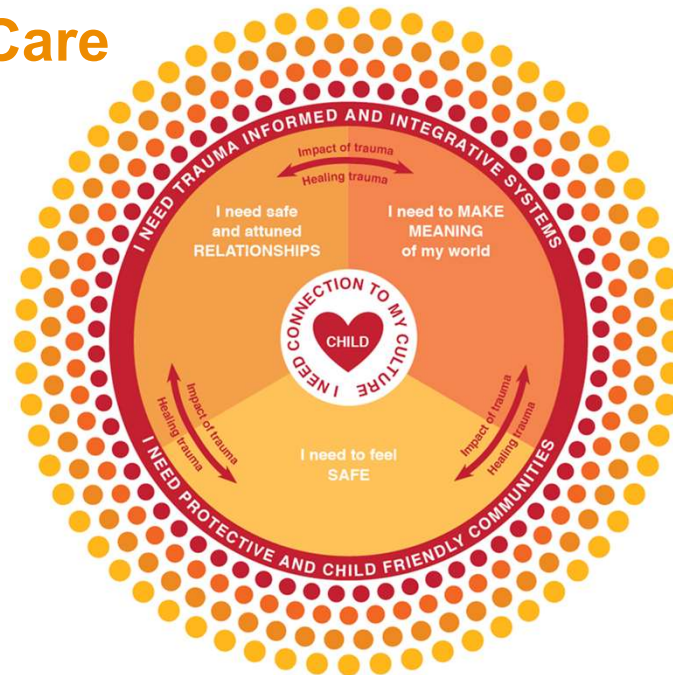
Take away practical skills and strategies that help facilitate trauma recovery for children and families



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ACF Model of Care



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Defining Trauma

Trauma is the emotional, psychological and physiological reactions caused by the prolonged and overwhelming stress that accompanies experiences of abuse, neglect and family violence.

The trauma that results from experiences of abuse, neglect or family violence is often called **complex trauma** or **developmental trauma**.

This type of trauma occurs in the context of relationships and is different to the trauma that may be caused by a one-off event such as a car accident or bush fire.

Children and young people are very vulnerable to the effects of trauma because of their brains' developmental immaturity.



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Trauma and Needs

The residue of trauma becomes an experience of unmet needs for children.

Children are left with needs that in the moment of hurt, pain and fear are unfulfilled. These needs stay activated ready for available relationships to respond to them, see them and gradually help them to be met.

These needs are physiological, developmental, and interpersonal, requiring relational investment and presence in order to be resolved.

“ It is like they are on a loop hoping that their needs for safety, attention and validation that were not fulfilled will eventually find at least one relationship in the present that meets these needs consistently over time. “ Joe Tucci



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Trauma and Needs

Connected relationships can restore safety by understanding and addressing the needs that were not met.

For example:

An experience of being alone, can be met with accompaniment

An experience of fear met with protection, and

An experience of shame met with acceptance.

Needs can be identified within the domains of trauma and can be responded to by reparative experiences described in the Making SPACE for learning framework.



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Why trauma informed practice with families is important

- Families we work with have experienced both current, historical and generational trauma
- Trauma impacts how people access services
- Responses to trauma are adaptive – without a trauma lens, behaviours can be seen as ‘antisocial’ or ‘maladaptive’
- Trauma survivors require specific, tailored interventions that minimise re-traumatisation and understand individual needs and responses to trauma

Child Serving Systems:

- All involved with child contribute to healing for child
- They restore sense of safety and control to child
- Creating a team around the child



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Child In the Centre Culture and Brain Development



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The Importance of Culture

How did you become who you are?

Safety: Belonging

Relationships: Connection

Meaning making: Identity



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Intergenerational & Transgenerational Trauma

The trauma experienced by Indigenous people as a result of colonisation and subsequent policies, such as the forced removal of children, has had devastating consequences. The disruption of our culture and the negative impacts on the cultural identity of Aboriginal and Torres Strait Islander peoples has had lasting negative effects, passed from generation to generation.



(Ralph et al, 2018)



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Intergenerational Trauma



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Reflection

When you watch this video what stands out to you? What phrases? Images? Sounds?

Does this enhance the meaning of Intergenerational trauma for you?

Is there information that you would like to now include within your practice?



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Culturally safe: Key practice principles and actions

- Relationships are critical
- Using stories and story-telling is a valuable and important tool
- Connecting to country and culture needs to be meaningful and not tokenistic
- Continual self-reflection builds **cultural humility** – who am I? What are my biases? What else do I need to know?
- Children and young people still all come with their own stories and we need to listen to those and not assume that a general understanding of the cultural background of the child means we understand the individual child's story or experiences
- Holistic approaches, as distinct from fragmented or individualistic approaches, are more effective and more valuable



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Cultural Healing Practices

01

Retell the story.

02

Hold each other.

03

Massage,
dance, sing.

04

Create images
of the battle.

05

Fill literature,
sculpture, and
drama with
retelling.

06

Reconnect to
loved ones and
to community.

07

Celebrate, eat,
and share.

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Brain Development & the Impact of Trauma



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How does the brain develop?



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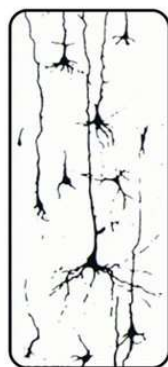
Brain development

- The brain develops sequentially from the bottom up
- All brains are wired, or connected, by experience
- As we grow and develop, our primary function- through brain connected with body- is to integrate sensory data to enable us to adapt successfully to our environment, thus facilitating survival and growth



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Birth



2 Years



6 Years



12 Years



Adult



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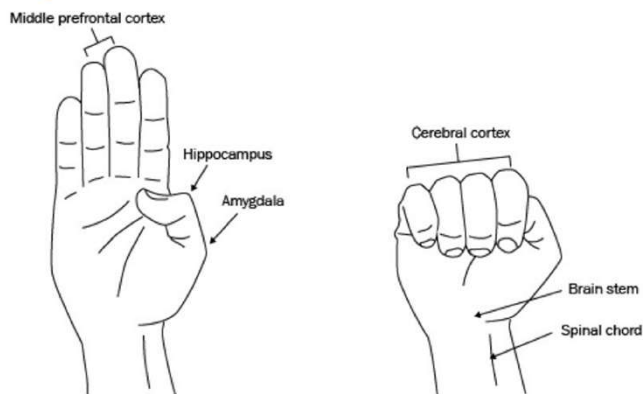
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Sequential brain development – building blocks



	The Thinking brain 3-5 Years
	The Emotions and Memory Brain - Birth to 4 years
	The Movement Brain Birth – 2 years
	The survival brain Pre birth to 8 months

Flipping a Lid – the impacts of toxic stress on the higher brain parts



Hand model courtesy of Dan Siegel

Neuroplasticity

- The brain's ability to reorganize itself by forming new neural connections throughout life.
- Neuroplasticity allows the neurons (nerve cells) in the brain to compensate for injury and disease and to adjust their activities in response to new situations or to changes in their environment

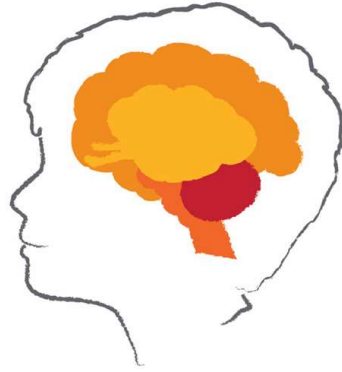


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Activity



	The Thinking brain 3-5 Years
	The Emotions and Memory Brain - Birth to 4 years
	The Movement Brain Birth – 2 years
	The survival brain Pre birth to 8 months

- 1) Creatively express the functions of your part of the brain.
- 2) Create an argument for why your part of the brain is the most important



I need to feel Safe



Discussion

What is safety?



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Safety

“Safety and healing gives us back to ourselves. Not to hide or fight any more . But to sit still calm our minds , listen to the universe and allow our spirits to dance on the wind. It lets us enjoy the sunshine and be bathed by the golden glow of the moon as we drift into our dreamtime... Safety in relationships gives us back to our country. To stand once again in our rightful place, eternal and generational. It keeps us strong and gentle at the same time”

Helen Milroy

“The removal of threat is not the same as the presence of safety”

Dr Stephen Porges



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Safe & Unsafe States of Being

MOBILISATION

In this state we feel unsafe

SOCIAL ENGAGEMENT

We feel Safe in these states

IMMOBILISATION

In this state we feel unsafe

We are active and mobilised without a sense of safety

- We fight, or flee, or our bodies actively freeze with tensed muscles.

We are active and mobilised with a sense of safety

We are socially engaged

- Sometimes known as the 'Play Zone' in this state our bodies are active as we socially engage with others.
- Our bodies feel calm and relaxed.
- We feel in synch and connected with others.
- We are orientated towards each other with welcoming voices & open faces.
- We find pleasure in stillness.

We come to be still with a sense of safety

Our body slows into an immobilised state without a sense of safety

- We are withdrawn, submissive, collapsed, numb.

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Social Engagement

We feel safe in this state.



- Our bodies are calm and relaxed.
- We engage in mirroring and reciprocation with each other.
- We are orientated towards one another with engaged, open faces.

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Mobilisation


Our bodies are filled with energy, and we need to move.

Play & Exploration
We experience a blend of mobilisation and social engagement in a **safely mobilised state**.

Fight or Flight or Active Freeze
We are mobilised **without a sense of safety** in this state.




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Mobilisation without feeling safe

Our bodies are filled with energy, and we need to move.

- Hypervigilant
- Edgy/jumpy
- Irritable – easily annoyed
- Poor recovery from distraction
- ‘silly’, loud, over-excitement
- Unsettled, sleep difficulties
- Outbursts, aggression
- Defensive, taking things personally
- Increased expectations of self and others
- Inflexible, ‘controlling’
- Sensitive to sensory input



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Immobilisation

Our bodies are slowed right down



Being still with others for pro-social reasons, like sharing a hug. We find pleasure in stillness. This is an intimate state.

We experience a blend of immobilisation and social engagement in a **safely immobilised state.**

Withdrawn, submissive, collapsed, numb

We experience immobilisation **without a sense of safety** in this state.





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Immobilisation
without feeling safe

Our bodies are slowed right down

- Flat, numb affect
- Disengaged, disinterested
- Withdrawn
- “boredom”
- Lethargic, unmotivated
- Disconnected from peers
- Developmental regression – e.g. with abilities to self-soothe, self-care/hygiene, toileting
- Changes to appetite

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The state of ourselves, the state of children

- When we know ourselves we can know the children
- When we attune to our bodies, we build upon our own connection to body.
- Body awareness enhances our ability to assess and make changes to improve our overall health.
- When we ignore our body's signals, we increase our receptiveness to stress, unhelpful habits and narratives.



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How do you promote safety for the families you work with?

Think about:

- Client's perception of safety
- Physical & emotional safety – triggers
- Risk of re-traumatisation – triggers
- Attunement
- Body language
- Cultural safety
- The language you use
- Environmental safety – service space – warm/cold, dark/light, noise, colours etc
- The worker-client relationship- trust, respect, transparency
- Addressing both child AND parental trauma



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Strategies to promote neuroception of safety

Physiological safety

Relational safety

Environmental safety

How do we create safety for those we work with & ourselves? What does it look like, feel like, sound like?

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I need Safe and Attuned Relationships



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Relationships as Anchors

Accompaniment is an experience for a child that offers emotional reciprocity, validation, care and comfort. In this experience they feel heard, met, felt and understood.

“Children internalize the people who understand and comfort them, so that they often have the felt sense of accompaniment when they are alone”

Bonnie Badenoch



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Relationships as Anchors

The concept of **“showing up”** which means :

- offering a quality of presence
- bringing your whole being, attention and awareness to the Child/Young Person
- providing an experience that enables them to expect positive interactions from others and themselves
- creating neural pathways in a student that will lead to selfhood, grit, strength and resilience

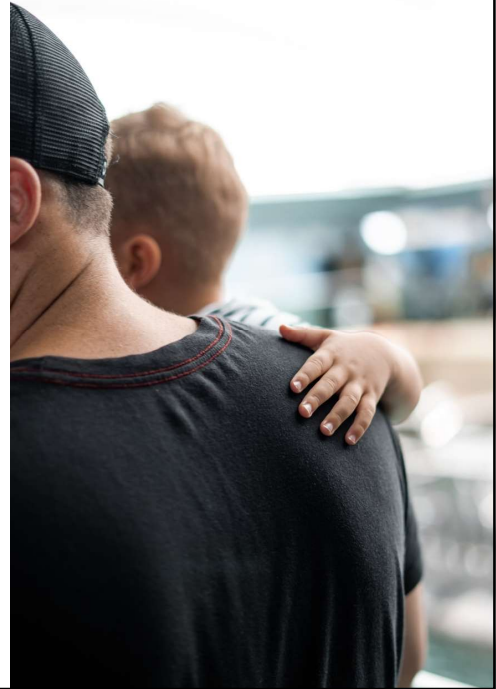
Dan Siegel and Tina Payne – The Power of showing Up: How Parental Presence Shapes Who Our Kids Become and How their Brains Get Wired



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Helping caregiver & child to repair their relationship

- **Empathise** with how difficult it may be for both parents & infant/child.
- **Encourage**/promote consistent, sensitive, responsive, attuned, caregiving and replicate this in the therapeutic relationship.
- The **therapeutic relationship** needs to mimic secure attachment characteristics including:
 - worker provides consistency, reliability, attunement, reflective capacity,
 - containment by worker (ability of the worker to tolerate the intolerable feelings/thoughts of the parent(s) and/or child and not pass judgement on these feelings/thoughts).



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Helping caregiver & child to repair their relationship

- **Explore** what is getting in the way of parent providing this consistent, sensitive, responsive, attuned, caregiving
- Help parents to **identify arousal states** in their child and explore what's underneath the behaviour
- **Respectfully challenge** the parent about punitive or authoritarian approaches – explore the impact that this style of parenting had on them
- Help families to create **new ways of relating** through:
 - ✓ play
 - ✓ exploratory discussion in order to increase their capacity to reflect and to offer what their infant/child needs.



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Managing parents/caregiver responses

“A coherent life story is one in which the adult has made sense of his or her own childhood experience, and has insights into how that past has influenced his development as an adult and as a parent” (Siegel 2006)

- To enable a parent to provide a child with reparative experiences they need to have a coherent life story - self narrative
- How a parent has come to make sense of their early life experiences, is the most robust predictor of how their children will become attuned to them and healed in relationship



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I need to Make Meaning of My World



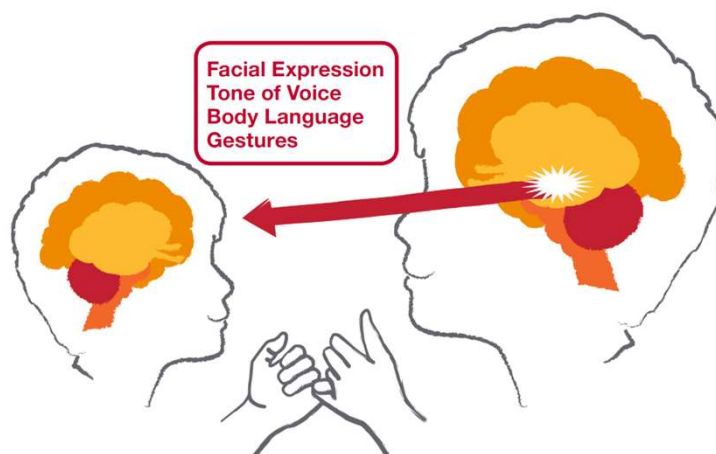
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How do I make meaning of the world?

We are deeply impacted by both our surrounding relationships and the environment on how we perceive and make sense of:

- **The world – safe vs unsafe**
- **Relationships – trustworthy vs unreliable**
- **Self- lovable vs unlovable**
- **Protected vs unprotected**

How do I make meaning of the world?



Trauma Responsive Approaches



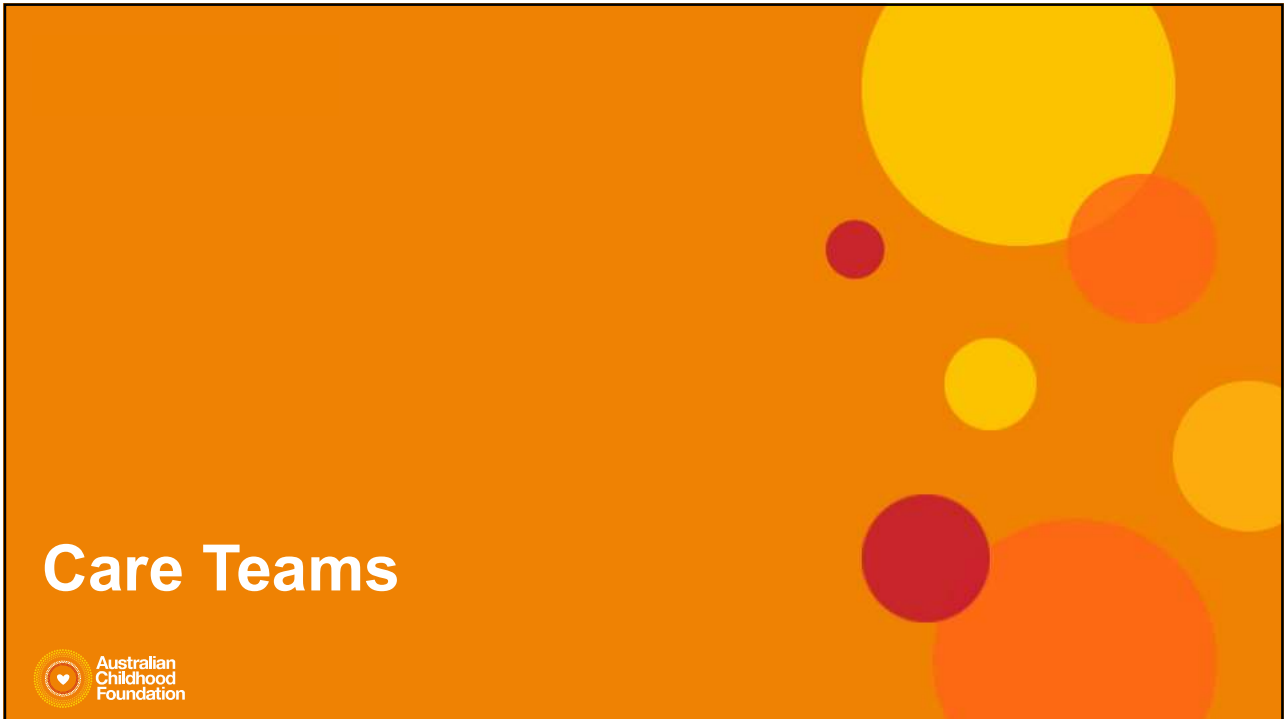
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Trauma informed approaches



- Understanding **trauma and its possible impact**
- Understanding trauma in the context of **child development**
- Promoting **safety**
- **Empowerment/** strength based
- Children having a sense of control/power in **decision making – having a voice**
- Ensuring **cultural humility**
- Healing happens in **relationships**
- **Integrating** care (collaboration)
- Belief in **hope based recovery**
- Worker **Self care**




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:practice


Care Teams


Collaborative processes for creating healing and change


Five qualities that characterise high-functioning Care Teams

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Honesty
Care Team members put a high value on effective communication within the Care Team, including transparency about aims, decisions, uncertainty, and mistakes. Honesty is critical to continued improvement and for maintaining the mutual trust necessary for a high-functioning Care Team.
- 

Discipline
Care Team members carry out their roles and responsibilities with discipline, even when it seems inconvenient. At the same time, Care Team members are disciplined in seeking out and sharing new information to improve individual and Care Team functioning, even when doing so may be uncomfortable. Such discipline allows Care Teams to develop and stick to their agreements even as they seek ways to improve.
- 

Creativity
Care Team members are excited by the possibility of tackling new or emerging problems creatively. They see even unanticipated bad outcomes as potential opportunities to learn and improve.
- 

Humility
Care Team members recognise differences in background, expertise or professional training but do not believe that one member is superior to the others. They also recognise that they are human and will make mistakes. Hence, a key value of working in a Care Team is that fellow Care Team members can rely on each other to help recognise and avert failures. In this regard, effective Care Teams work is a practical response to the recognition that each of us is imperfect and no matter who you are, or how experienced or smart you are, you will fail at times.
- 

Curiosity
Care Team members are dedicated to reflecting upon the lessons learned in the course of their daily activities and using those insights for continuous improvement of their own work and the functioning of the Care Team.

(Macnamara, 2020)


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The key functions of the Care Team are to:

- work collaboratively to put the best interests of the young person first
- promote the meaningful participation of young people and family members in planning processes that address all aspects of the young person's life
- get to know the young person well enough to know how best to involve them in decision-making processes and ensure their wishes and views are taken into account
- develop the skills for providing trauma-informed practical care and support
- establish or maintain the young person's connections to their Aboriginal community and culture
- ensure young people from diverse cultural and religious backgrounds have their cultural and religious needs met
- respect each other and acknowledge the knowledge and expertise of other Care Team members
- share relevant information to monitor goals, objectives and progress of therapeutic care plans
- develop, implement, monitor and review therapeutic care plans that address a young person's needs across all key environments and relationships with interventions which have clear, achievable goals, timelines, responsibilities and outcomes
- recommend service provision options, or changes, as necessary to implement the plan
- consider and review the young person's current and longer-term care and needs and how these will be met
- develop strategies and plans to mitigate risk issues
- ensure adequate supports are in place to support the successful engagement of the young person in key environments (eg placement and school) and relationships
- ensure all therapeutic needs of young people are, and continue to be met
- plan for and support transitions for young people (eg placement moves, reunifications, leaving care, school transitions)
- acknowledge and celebrate successes with the young person, no matter how small

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Well Being



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Reflection

- What part of the brain are you/staff in?
- Seven Types of Rest: Physical Mental, Spiritual, Emotional, Sensory, Social, Creative (work of Dr Sandra Dalton-Smith)
- What is sitting under our behaviours? Self Care or Self Comfort?
- Where do we find connection?
- Professional experience- Professional journey



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Thank you for your participation today.

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