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| **Unit No. 7b** | ***Working with traumatised children*** |
| **Unit objectives**   * To introduce some models for working with traumatised children * To enable participants to identify practical measures to help traumatised children to manage their learning and behaviour both in the school setting and at home. | |
| **Outline of Unit**   * Activity and discussion *Exploring the senses* * Presentation and discussion * Activity : *Sensory audit* * Case Discussions | |
| **Resources required to deliver unit**   * PowerPoint Slides * Hand-outs * *Working with traumatised children* * *Implications of trauma for learning and coping in the school environment* * *Exploring the senses* * *Sensory audit of your environment* * *Jenny aged 14* * *Kenneth aged 10* | |
| **Introduction to trainer**  This unit builds on the ideas introduced in Unit 7a: *Understanding trauma and loss* and also assumes a knowledge of brain development and attachment. If participants do not have this pre-existing knowledge base, ensure that you incorporate the relevant theory into the session. Be aware that the content of the session may have a profound emotional effect on participants either because of trauma in their personal lives or because of their professional connections to traumatised children. Emphasise that it important they take care of themselves and each other and that they should feel comfortable to withdraw at points if they feel too affected by the material or discussion. | |

**Group Activity: Exploring the senses (10 Minutes)**

Give out the hand-out and ask participants to undertake the task. This exercise allows participants to begin to understand the power and immediacy of sensory experiences. Most people are able to make vivid connections to people, places or events from their past. They also recognise that their responses are very individual, for example the smell of pipe smoke may be very comforting if it brings back memories of well-loved grandfather whereas for many non-smokers without such a personal connection it may be very unpleasant. Make the point that many of them will also be able to recognise that certain sensory experiences may bring back unpleasant memories. Explain that the brain is very effective at making associations and this is the basis of learning. For children who have experienced severe trauma then the sensory environment at the time of the trauma can be strongly associated with the trauma itself. A smell, sound, taste etc. may trigger an alarm response in the child which may lead to an aggressive outburst for no apparent reason. Understanding sensory triggers and helping children to make sense of their own responses can be hugely important in working with traumatised children. Moreover, using sensory stimuli to link to positive experiences can be very healing for children and also provide them with a way to manage their stress and anxiety more effectively.

**Presentation and discussion (25 minutes)**

Use the hand-outs and the additional resources to develop a presentation. Although the PDFs are lengthy they have some excellent material and suggestions particularly for the school setting.

It is important to state unequivocally that under the UNCRC we have an obligation to provide traumatised children with experiences that enable them to recover from trauma. Looked after children have a right to the support that will enable them to heal and learn and this places clear responsibility for understanding about trauma and working in a trauma sensitive way on all the adults involved in their care or education.

Re-emphasise the impact of trauma on every aspect of children’s functioning. Remind participants that chronic trauma has often left children with a higher base line level of arousal and also that they are far more reactive to minor stresses than their peers. Moreover, many traumatised children had seriously adverse experiences while in the womb or in early infancy which have had a profound impact on the organising brain. Use the slide showing the hyperarousal and dissociative continuum to point out that none of us are capable of rational reflective thought in situations of extreme terror. Traumatised children may reach the point of extreme fear or terror very quickly. For adults to be helpful to children with these difficulties they need to have an accurate sense of the developmental **stage** a child has reached and also be able to make a clear assessment of the current **emotional state** of a child. For example expecting a child who is emotionally two to act as a well-functioning eight year old is unrealistic even if that is their chronological age. Indeed, such a demand is in itself sufficient to push such a child into a full blown two year old collapse into terror and rage. On the other hand even if a child has got some well-developed cognitive or emotional skills but has moved rapidly up the hyperarousal continuum because some reminder of trauma has triggered fear, it is unreasonable to expect a child to manage the situation in a calm or rational way.

Talk briefly about some of the different models that are available. The three identified here are not the only approaches that are helpful though they are all excellent examples of using trauma theory in a coherent and integrated way within organisations. Most approaches emphasise the importance of a feeling of safety as a basis for working with traumatised children and this involves a positive relational environment, consistency and predictability, emotional regulation ( by adults as well as children) and supporting competence and hope. In addition an understanding of the neurodevelopmental stage of the child is crucial. Remind participants of the importance of patterned rhythmic and rewarding activity in helping children to recover from any adversity that has affected their brain development. Introducing appropriate sensory breaks throughout the school day, for example, can help hyperaroused children manage what may feel to them to be the almost impossible demands of the classroom

Encourage participants to identify effective ways of working with traumatised children that they have used or they would like to try in their own environments. Supplement participants’ ideas with those in the handouts and the additional resources.

Show the slide with the quote from the young boy who is describing how unsafe he feels even in an environment which is actually safe. In order to recover from trauma it is not enough to be safe it is essential to FEEL safe.

Finally ensure that you point out the risk of secondary or vicarious trauma. There is clear evidence of the existence of secondary trauma and this is a very real hazard of working closely with traumatised children. Encourage participants to be alert at an individual level for signs of secondary trauma in themselves or colleagues. Emphasise the importance of seeking help with these immediately. Additionally point out that there are a number of organisational strategies that can reduce the likelihood of secondary stress developing and can mitigate its impact if it does occur. Suggest that participants explore the organisational supports that exist when they return to work and bring any deficiencies to mangers’ attention. Employers have a duty of care to their employees and since working with traumatised children is inherently very stressful there should be good strategies in place to deal with this phenomenon.

**Individual and group activity: Sensory audit of the environment (20 minutes)**

Start by showing slide 14 which emphasises the power of the environment.

Ask participants to work in small groups with others from the same professional background and preferably from the same organisation. Ask them to think about the environment in which the looked after children for whom they are responsible either live or go to school, and undertake the following task.

1. What messages does the physical environment express? Are these appropriate for the children living or going to school there? Concentrate on the sensory environment. What areas are soothing, what areas are stimulating? Are there aspects that are particularly positive? Are there areas that could be improved? Remember the external environment as well as the internal.
2. Each group concentrate on a different young person. What aspects of the environment are soothing or appropriately stimulating for this particular child? Are there aspects of the environment that may trigger difficult responses in the child or prevent the child being able to become calm and relaxed? Ensure that you cover all aspects of the environment.

This activity builds on the first one *Exploring the senses.* It is important to point out that the physical and sensory environment can be actively used to help children recover from trauma but it can equally well become part of the problem if it is not properly managed and maintained. Ask participants if there are aspects of their own environments that they could change or use more effectively if they take a trauma-sensitive approach. It may be helpful to use the safety tool handout as part of this activity but it is important to remember that it is from a different cultural context (USA) in which restraint and seclusion are more commonly used with children. It may be appropriate only to use the images rather than the introduction to the tool.

**Case Discussion (25 minutes)**

Ask participants to undertake the following activity. Alternatively you may choose to use the example of Craig or encourage participants to identify a child with whom they have worked. These alternatives may, however, require more time as there will be much more information available to analyse and discuss.

**Group Activity**

In your small groups discuss either the case study of Kenneth or Jenny and answer the following questions

1. What might be the physiological, social and emotional consequences of these traumatic experiences for the child or young person?

2. How may this affect their capacity to learn and their ability to manage in a school setting?

3. What strategies would you use to support the education of this child or young person if they were in:

- Your school

- Your home/unit

**Large Group Discussion (20 minutes)**

Take feedback from participants asking them to comment particularly on question 3. Ensure that the focus remains on the impact of trauma on children’s capacity to learn rather than a more generalized discussion on trauma. Ensure that the group understands that even severely traumatized children can be helped to adapt to their experiences and manage to learn more successfully and that all adults involved with them have a responsibility to help in this process.

The case studies of Kenneth and Jenny both show clear evidence of trauma. The kind of factors participants should be identifying in the feedback session would include the repetitive and prolonged nature of the trauma for both children. In both cases there has been actual and threatened physical harm to the child and those they love. Both children have felt overwhelmed and powerless in the situations they have experienced. The perpetrators of the trauma have been family members. There are, however, important differences in their experiences.

Kenneth has experienced trauma since he was a tiny baby and this may have left him very resistant to the more positive environment of the foster home. He has not learned how to regulate his own stress and he is clearly showing signs of hyper-arousal which is having a very negative impact on his capacity to manage school.

Jenny on the other hand has had more positive early experiences and this may mean that she will be more able eventually to process the traumatic events of the last few years. Her response to the trauma seems to be of a dissociative kind. Rather than responding aggressively she is psychologically cutting herself off from the trauma as a way of managing.

Make sure that the key messages from the trauma presentation are picked up by participants in their discussions about the cases. They should be able to link the particular needs of these children to discussion generated about strategies and techniques. Encourage them to reflect on other children they work with and share effective strategies or explore alternative ways of understanding and working with children who they find particularly challenging in this area.

**KEY MESSAGES**

* Trauma evokes primitive survival mechanisms which interfere with children’s capacity to learn.
* It is important to identify particular triggers for individual children but also to recognize more general factors that may evoke fear or alarm in traumatised children.
* The normal expectations and demands of school can overwhelm the coping mechanisms of traumatised children.
* The physical and sensory environment can be used as a tool to help children relax and manage the demands of living and learning.
* Teachers, carers and parents can develop strategies and techniques that help such children to manage better and learn more effectively.
* Adults working with traumatised children are themselves at risk of secondary trauma