Developmental trauma in children growing up in complex trauma environments

Day Two

Emeritus Professor Judy Atkinson

Patron: We Al-li
In recognition of lands, ancestors and elders of the Kulin Nation,
<table>
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<tr>
<th>Time</th>
<th>Event Description</th>
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| 9.30 to 10.30am | **Check in from yesterday**  
**Four principles of Neurodevelopment**  
*“Children’s play is hard work”: Let’s talk* |
|              | **Morning tea**                                                                                                                                     |
| 10.45 to 12.30 | **Presentation: Educaring as Healing**  
**Discussion: How does this apply to my workplace – community?** |
|              | **Lunch**                                                                                                                                         |
| 1.30 to 3.00 pm | **Vicarious Trauma - Burn Out**  
**Self-care as re-investment practice. How do I care for myself**  
**How do we care for each other?** |
|              | **Afternoon tea**                                                                                                                                   |
| 3.15 to 4.00 pm | **Elders circle**  
**Post evaluations - Close** |
Stories are our law. ...

- Stories give identity as they connect us and fulfill our sense of belonging. Stories are grounding, defining, comforting and embracing. Stories vary in their purpose and content and so Stories can be political and equally, healing. Stories can be shared verbally, physically or visually. Their meanings and messages teach, admonish, tease, celebrate, entertain, provoke and challenge. .... To know your Story is to know who you are related to and the depth of this relatedness. Without your Stories you don’t know who you are. (Martin K. 2002)
As young children develop, their early emotional experiences literally become embedded in the architecture of their brains.

It is essential that young children’s feelings get the same level of attention as their thinking.

Indeed, learning to manage emotions is more difficult for some children than learning to count or read and may, in some cases, be an early warning sign of future psychological problems. (Working paper 2: CDC)
Why we did what we did

- The whole We Al-li approach began after a child had been raped. We wanted to have people understand the developmental trauma that results from such experiences. We saw in all our work an unskilled workforce, working with traumatised Indigenous children.

What we did

- Worked from the theory base of neuro-developmental trauma as we worked with children while building on Indigenous healing practice using cultural tools in healing children from trauma. Emotional release, sandplay, clay work, art, music, theatre, and yoga games.

What we learnt

- This needed to be a fun unit, blending the theory of neurodevelopment (developmental trauma) with activities that supported emotional release and trauma healing skills for working with children. This became one of our most loved units.
Neuro-developmental rationale for healing trauma

Resonance – growth, and physical wellness, vitality, meaningful life - evidenced by responsiveness & responsibility - curiosity and openness promote growth.

Encourage Abstract thought
✓ Story telling - writing
✓ Drama theatre
✓ Art and music

Facilitate Emotional Regulation - relationships
✓ Dance - Play – Art -

Somato-Sensory Integration
✓ Movement & Yoga games
✓ Music
✓ Touch
✓ Nature Discovery

Establish State Regulation
✓ Safe touch massage pressure points

Meaning Beliefs
Judgements
Identification
Self Talk

The Heart brain Resonance
Cortical

Affect
Emotion

Sensation
Felt Sense
Body Experience

Vitality

Brain stem
Midbrain
Limbic

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<table>
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<tr>
<th>Developmental age</th>
<th>&quot;Sensitive Brain Area&quot;</th>
<th>Critical functions</th>
<th>Primary goal of development</th>
<th>Optimizing Experiences</th>
<th>Enrichment Activities</th>
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<tbody>
<tr>
<td><strong>0 -1</strong></td>
<td>Brainstem</td>
<td>* Regulation of arousal</td>
<td>* State regulation * Flexible stress response</td>
<td>* Rhythmic &amp; patterned sensory input * Auditory or tactile</td>
<td>* Massage * Rhythm * Touch</td>
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<tr>
<td><strong>1 -2</strong></td>
<td>Midbrain</td>
<td>* Integration of multiple sensory inputs * Motor regulation</td>
<td>* Sensory integration * Motor control Affiliation</td>
<td>* More complex movement * Simple narrative</td>
<td>* Music * Movement * Touch</td>
</tr>
<tr>
<td><strong>1 -4</strong></td>
<td>Limbic</td>
<td>* Emotional states * Social language * Interpretation of social information</td>
<td>* Emotional regulation * Attachment * Empathy</td>
<td>* Complex movement * Narrative * Social experiences</td>
<td>* Dance / Play * Art * Nature discovery</td>
</tr>
<tr>
<td><strong>2 -6</strong></td>
<td>Cortex</td>
<td>* Abstract cognitive functions * Social / emotional integration</td>
<td>* Abstract reasoning * Creativity</td>
<td>* Complex conversation * Social &amp; emotional experiences</td>
<td>* Story-telling * Drama * Exposure to performing arts</td>
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</table>
The four main principles of neurodevelopment essential for early childhood curriculum:

1. Sequential development
2. Use-dependent development
   - Neurodevelopment is dependent upon the presence, pattern, frequency and timing experiences during development music dance art reading conversation
3. Doors of opportunity
   - of all the experiences throughout the life of an individual, the organizing experiences of early childhood have the most powerful and enduring effects on the nervous system.
4. Contextual development
   - Children learn in the context of their social environments
1. **Sequential Development**

- The brain, at birth, is considered by some to be undeveloped. Nonetheless, the nervous system has been developing since conception along the blueprints of the genetic structuring, unique vitality of the organism and it’s unique environment.
- During and after birth the organism continues to organize and grow in a sequential fashion, starting from the lowest, most regulatory regions of the brain and, proceeding up through the more complex parts of the brain responsible for more complex functions.
2. Use-dependent Development

- The normal organization of any nervous system and brain area or capability is ‘use-dependent’: pattern, frequency and timing experiences during development.

- The more patterned activity (e.g., music, dance, reading, conversation), the more the nervous system and brain regions responsible for these tasks will organize and be functionally ‘healthy’. The implications of this are profound.

- Children exposed to consistent, predictable, nurturing and enriched experiences will develop neurobiological capabilities that will increase the child’s chance for health, happiness, productivity and creativity.
The program implications of use-dependent development are

- That children exposed to trauma will be at greatest risk and, from a public health perspective, should be the target of proactive enrichment and therapeutic services.

- Further implications of the principle of use-dependent neurobiological development are in service design and delivery.

- The enrichment or therapeutic services that are provided need to be consistent, predictable, patterned and frequent.
  - This means that the major providers of the experiences in the child’s life – caregivers, teachers, parents – must be involved in learning and delivering elements of the therapeutic and enrichment activities outside of the specific hours dedicated to this during the week. (products could be made available)
  - Targeting high-risk children, supporting parents, caregivers, teachers and volunteers to complement and enhance the services provided by the professional staff.
3. Doors of Opportunity

- The majority of this sequential and use-dependent development of the brain takes place in early childhood.

- Indeed, by age three, the child’s brain is 90% adult size.
  - This means that of all the experiences throughout the life of an individual, the organizing experiences of early childhood have the most powerful and enduring effects on nervous system organization and functioning.
  - We do not optimize this opportunity in early childhood. Indeed, we typically wait until a child is so impaired, dysfunctional, acting out and failing in school, before we initiate services.
  - Those few resources that are dedicated to early childhood tend to be inefficient and unfocused.
4. Contextual development

- Children learn in the context of their social environment
- The social nervous system affects this sequential and use-dependent development of the child in their neurodevelopment progress.
  - Trauma permeates and can immobilize the nervous system affecting personal resiliency, self-image, interpersonal relationships, family dynamics, and communication patterns.
Healing is:

- An awakening
- A sense of safety and security
- Community Support
- Rebuilding family and community connections
- An ever deepening sense of self knowledge
- Ceremony in Strengthening Cultural and Spiritual Identity
- Is Transformation and Transcendence.
Examination of the known beliefs, rituals, and healing practices for loss and trauma [by Indigenous peoples]... reveal some remarkable principles.

Healing rituals converge into a set of core elements related to adaption and healing following trauma. ...

These core elements include an overarching belief system – a rationale, a reason for the pain, injury, loss; a retelling or re-enactment of the trauma in words, dance, or song – all provided in intensely relational experience(s) with family and clan participating in the ritual. ...
- retell the story,
- hold each other,
- massage,
- dance,
- sing,
- creating images of the battle in literature, sculpture and drama, reconnecting to loved one and to community,
- celebrate, eat and share together
Perry is clear that these Indigenous healing practices work because they are:

- ‘repetitive, rhythmic, relevant, relational, respectful and rewarding’ (ibid).
- “While these therapeutic practices may not at first seem “biological”: be assured that they are not only likely to change the brain, but they will assuredly provide the patterned, repetitive stimuli required to specifically influence and modify the impact of trauma, neglect, and maltreatment on key neural systems” (ibid).
Children’s Play is hard work

1. The Massage Story

2. Sammy’s story

3. When words won’t come

4. This piggy’s titties has no milk.
Let’s talk

End of session one
Dadirri Safe Places  
Aboriginal Cultural and Spiritual Identity

- **Why we did what we did:**
  - We found people did not have a strong sense of self, and often had a conflicted sense of safety in their lives, of culture, and spirituality.

- **What we did:**
  - Introduced circle work, learning through dialogue, and reflective practice
  - Exploring “Who am I’, “who are we”.

- **What we learnt**
  - It is vital to ground people in principles of safe engagement. People needed to learn to listen to them selves and others, without judgment.
  - Needed to learn reflective practice.
Why we did what we did
People needed to be able to evaluate their health and wellbeing as a whole of life experience, with a tool they could use not just for themselves but also for their family and community wellbeing, as a whole of life social construct.

What we did
Deepens the process of learning circles using cultural narratives to help people walk the circle of wellbeing – spirituality, environment, relationships, emotions, physical body, sexuality, stress, life purpose. Art and music is introduced as tools of healing from trauma, in this module.

What we learnt
Grounds people, providing a tool for self analysis and critical reflection, being able to focus on those parts of the self being neglected. We found many people had never considered the interrelationship of these factors in health, in their lives.
Why we did what we did
- Loss and grief is one of the most important units, however grief and trauma can become confused.
- We saw the differences between loss and grief and traumatisation

What we did
- Introduced the Loss History Graph. Impacts of multiple losses,
- Loss cycles. Loss after suicide
- Body awareness to locate body unhealed trauma
- Supporting people to work in pairs
- Ceremonies of healing.

What we learnt
- This along with the trauma unit seem to be the two most important modules. Generally people are carrying compounded loss and grief issues but need to understand the differences between loss and grief and trauma.
- It is important that people come out of this module with a sense they can recover, because at this time there is no outlet from the compressed grief of multiple compounding losses.
- We needed to give people skills to continue their grief work within their families or community.
- Facilitators needed to be continually doing their own work on loss and grief, because of their own personal lives interlinking with the professional practice (stories).
Why we did what we did – This is a trauma specific unit

- By this time we were hearing many trauma stories. People need to have the theory of trauma (generational developmental complex) before they are introduced to trauma healing skills.

What we did

- A blend of trauma theory and recovery practice – provides analysis of violence related trauma, resulting in alcohol and other drugs, suicides, homicides, domestic violence and child abuse as cause and effect. Tools used are:
  - Geno-trauma grams, Felt sense - lessons from nature
  - Activation, titration, resourcing and discharge
    providing capacity for understanding trauma across generations and tools for working with both individuals and groups.

What we learnt

- Aboriginal people got it! and could see what they could do for themselves. We saw multiple layers of trauma that individuals, families and communities can carry which creates complexity and the need to reemphasis safety and security and knew they had to do something. Through the trauma the other issues are clearly symptoms of the trauma and not separate from it.
Why we did what we did

- Violence is endemic within many Aboriginal families and communities. We wanted to give participants the opportunity to develop an action plan for themselves and their family/community.

What we did

- We created The Action Team of the Town of Everywhere, where each person/participant was invited to teach others about their knowledge of the different forms of violence within their town, while working together to put an action plan into place. The Action Team was based on learning through dialogue, with a belief that each participant had something to teach us all.

What we learnt

- Not to lock people into a feminist analysis of domestic violence, but allow participants to work in action planning for community recovery from a deep analysis of their own violence experiences/understanding. This provided people with a sense of self capacity and competency. The Action Plans were powerful in their application of knowledge into community action.
Why we did what we did
- Our Community asked for parenting skills. They felt that because of the layered trauma and institutionalisation, in too many cases, parenting skills had been lost or misplaced.

What we did
- We worked with parents and children, providing examples of parenting practice in real life learning and discussions. We asked people to go back to the old ways of parenting.

What we learnt
- We found parents needed parenting. As healing happened, the knowledge and skills were still there. They just needed to be brought out and valued.
**Celebration in Ceremony**

**Coolaman**

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**Men’s & Women’s Healing Recovery**

- **Why we did what we did:** We found men and women needed their own healing program separate to each other.

- **What we did:** In reflective discussion and practice explores the traditional and contemporary issues that contribute to Aboriginal women’s and men’s lives today. Each woman or man was supported to bring her- his own healing practice to share with others.

- **What we learnt:** The historical experience of western women and men has been transferred to Aboriginal gender roles, and this combined with the historical trauma experiences has negative impacts on both men and women. Both groups welcomed the healing ceremonies they made as separate gender groups.

- We found men developed a greater sense of responsibility in their growing awareness of the impacts of trauma, as a social construct in their lives. Men seemed more empowered to be responsible for themselves and their families.

© Artwork Chris Edwards Haines 2004
Celebration in Ceremony

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© Artwork Chris Edwards Haines 2004
“These stories are historical because the storyteller believes that the stories is not just about her/him self, but also her / his culture and society.” (Mollica 2006)
A group story map exploring family support needs.

End session three
“The person’s trauma story becomes and remains the centre piece of the healing process” (Mollica R 2006)

“Healing Invisible Wounds – Paths to Hope and Recovery in a Violent World”
Let’s talk

End of Session Two
The Coolaman holds the stories
We create the space for healing.
The healer has to place him/herself as close as possible to the pain and suffering of the traumatized person/people in order to take in the revealed truth. This process becomes the foundation of all healing actions.

Our clients change us forever

Awareness
Being attuned to one’s needs, limits, emotions and resources. Heed all levels of awareness and sources of information, cognitive, intuitive and somatic. Practice mindfulness and acceptance.

Balance
Maintaining balance among activities, especially work, play and rest. Inner balance allows attention to all aspects of oneself.

Connection
Connecting with yourselves, to others and to something larger. Communication is part of connection and breaks the silence of unacknowledged pain. These connections offset isolation and increase validation and hope.
Holding the space ...

- Give people permission to trust their own intuition and wisdom.
- Give people only as much information as they can handle.
- Don’t take their power away.
- Keep your own ego out of it.
- Make them feel safe enough to fail.
- Give guidance and help with humility and thoughtfulness.
- Create a container for complex emotions, fear, trauma, etc.
- Allow them to make different decisions and to have different experiences than you would.
# So how do you sit with a shattered soul?

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<th>Gently, with gracious and deep respect.</th>
<th>Give freely. Take abundantly.</th>
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<tbody>
<tr>
<td>Patiently, for time stands still for the shattered, and the momentum of healing will be slow at first.</td>
<td>Find your safety, your refuge, and go there as you need.</td>
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<tr>
<td>With the tender strengths that comes from an openness to your deepest wounding, and to your deepest healing.</td>
<td>Words won't always come; sometimes there are no words in the face of such tragic evil.</td>
</tr>
<tr>
<td>Firmly, never wavering in the utmost conviction that evil is powerful, but there is good that is more powerful still.</td>
<td>But in your own willingness to be with them, they will hear you; from soul to soul they will hear for that which there are no words.</td>
</tr>
<tr>
<td>Stay connected to that goodness with all your being, however it manifest itself to you.</td>
<td>When you can, in your own time, turn and face that deep chasm within.</td>
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<td>Let go, Grieve, Rage, Shed.</td>
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There is an inner healing mechanism ...

- This force, which lies within all of us, is the biological, psychological, and social power of self-healing, that innate capacity possessed by all human beings to restore their physical and mental self to a state of full productivity and quality of life, no matter how severe the initial damage.

- Richard Mollica 2006
Elders Circle: What have we learnt?
How will we use what we have learnt?
What is missing – what more do we need to know?
“You said, 'They’re harmless dreamers and they’re loved by the people.' 'What,' I ask you, 'is harmless about a dreamer, and what,' I ask you, 'is harmless about the love of the people?' Revolution only needs good dreamers who remember their dreams
Tennessee Williams

There is always a dream dreaming us

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