

Trauma Informed Practice:

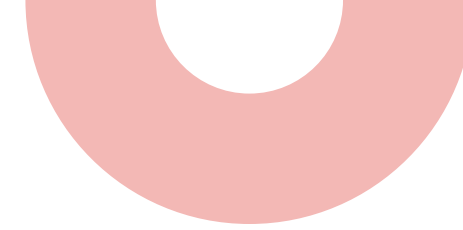


Acknowledgment of Country



A Word of Caution....

This topic can be difficult and sensitive



Australian Professional Standards for Teachers

Know your students and how they learn

- Use teaching strategies based on knowledge of students' physical, social and intellectual development and characteristics to improve student learning.

Create and maintain supportive and safe learning environments

- Establish and implement inclusive and positive interactions to engage and support all students in classroom activities.

Knowledge of trauma-informed practice



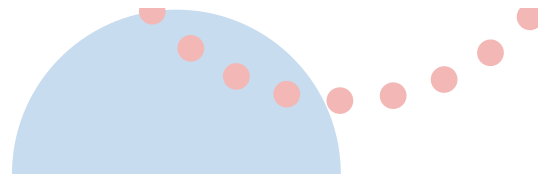
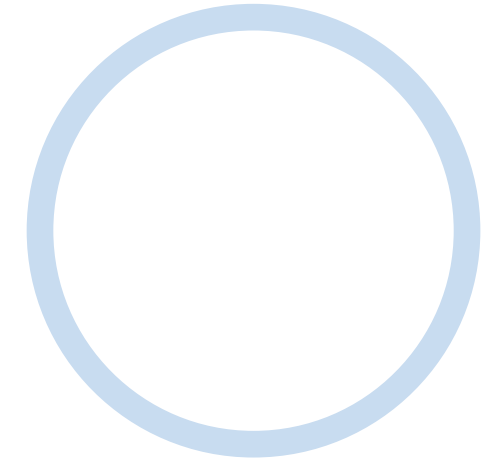
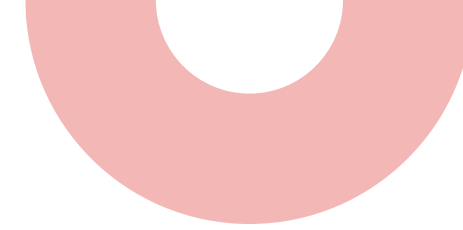
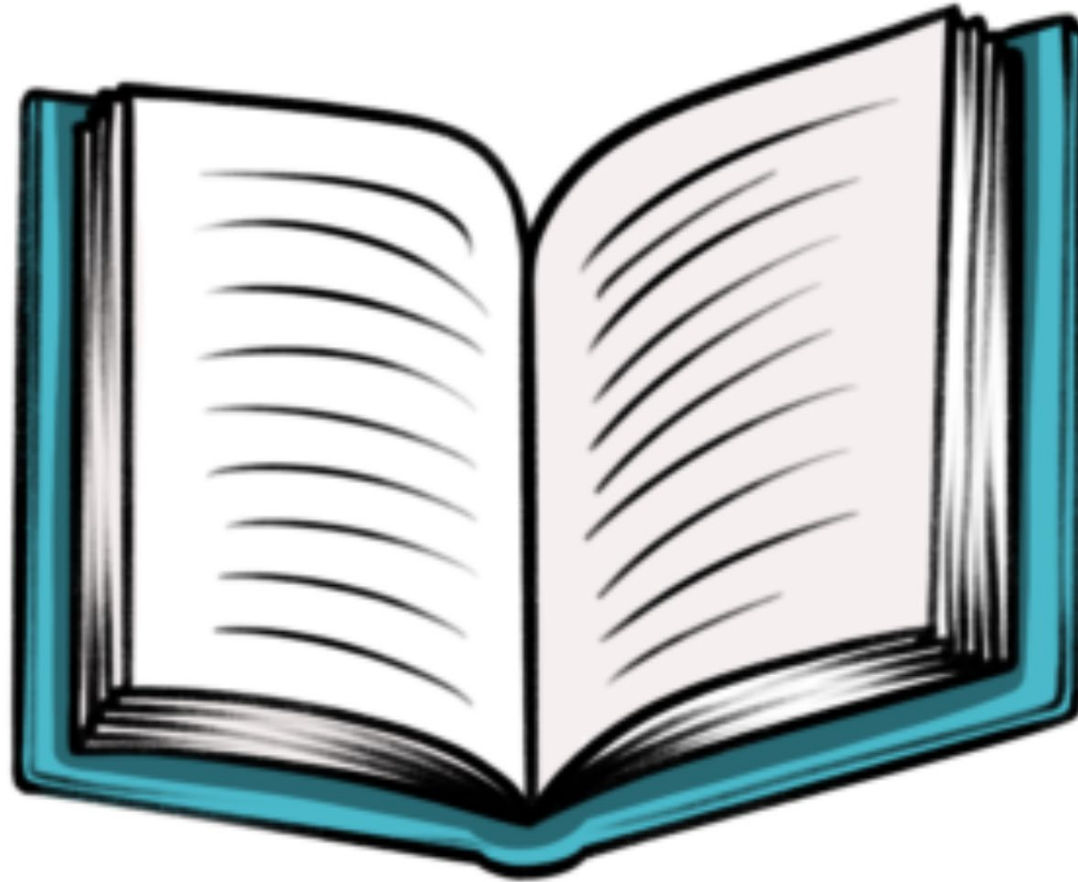
A paradigm shift... The neuroscience lens

“The most important question we can ask ourselves as child-serving professionals is not *'What's wrong with you?'* but *'What happened to you?'*”



Dr. Bruce Perry

Let us begin with a story....



What is Trauma?

Type I Trauma

‘Simple trauma’

Refers to a ***single traumatic*** event or experience that occurs within a relatively short period of time.

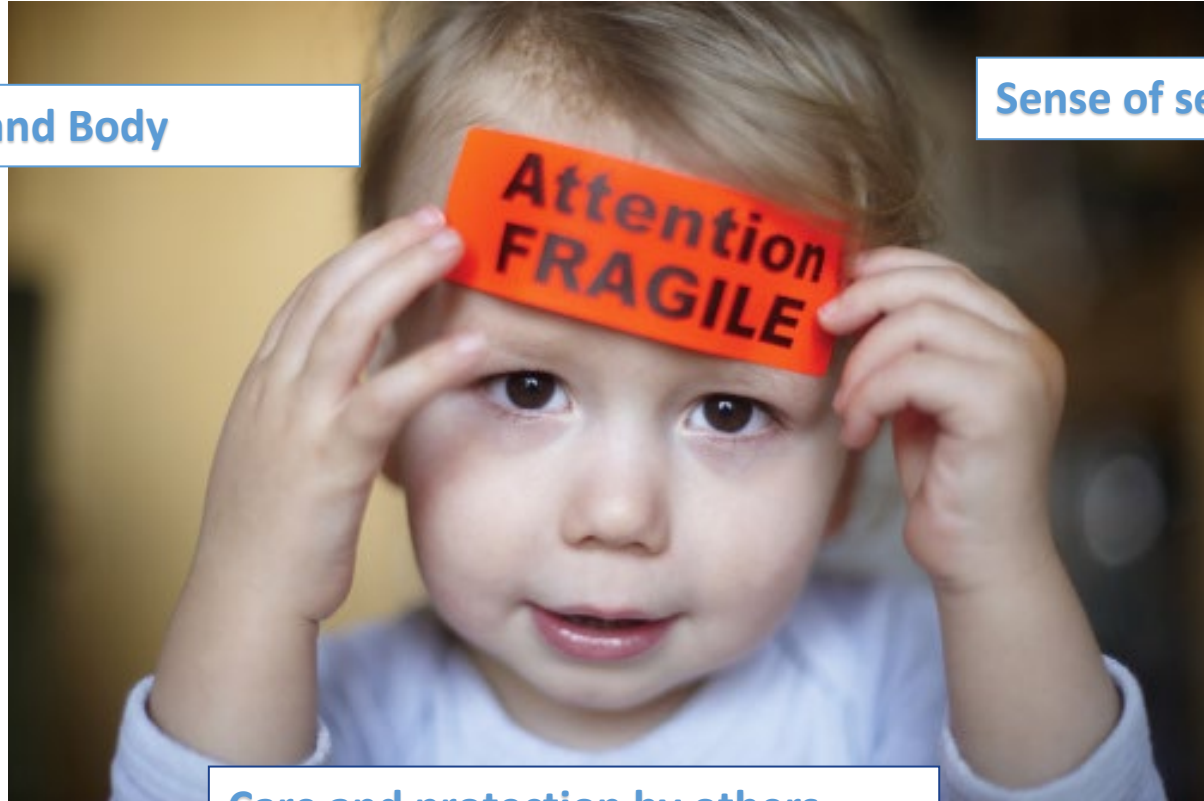
It is often characterised by a discrete incident or occurrence that causes intense distress or threat (or perceived threat) to an individual's physical or psychological wellbeing.



What makes children uniquely vulnerable to the impact of trauma?

Brain and Body

Sense of self and others

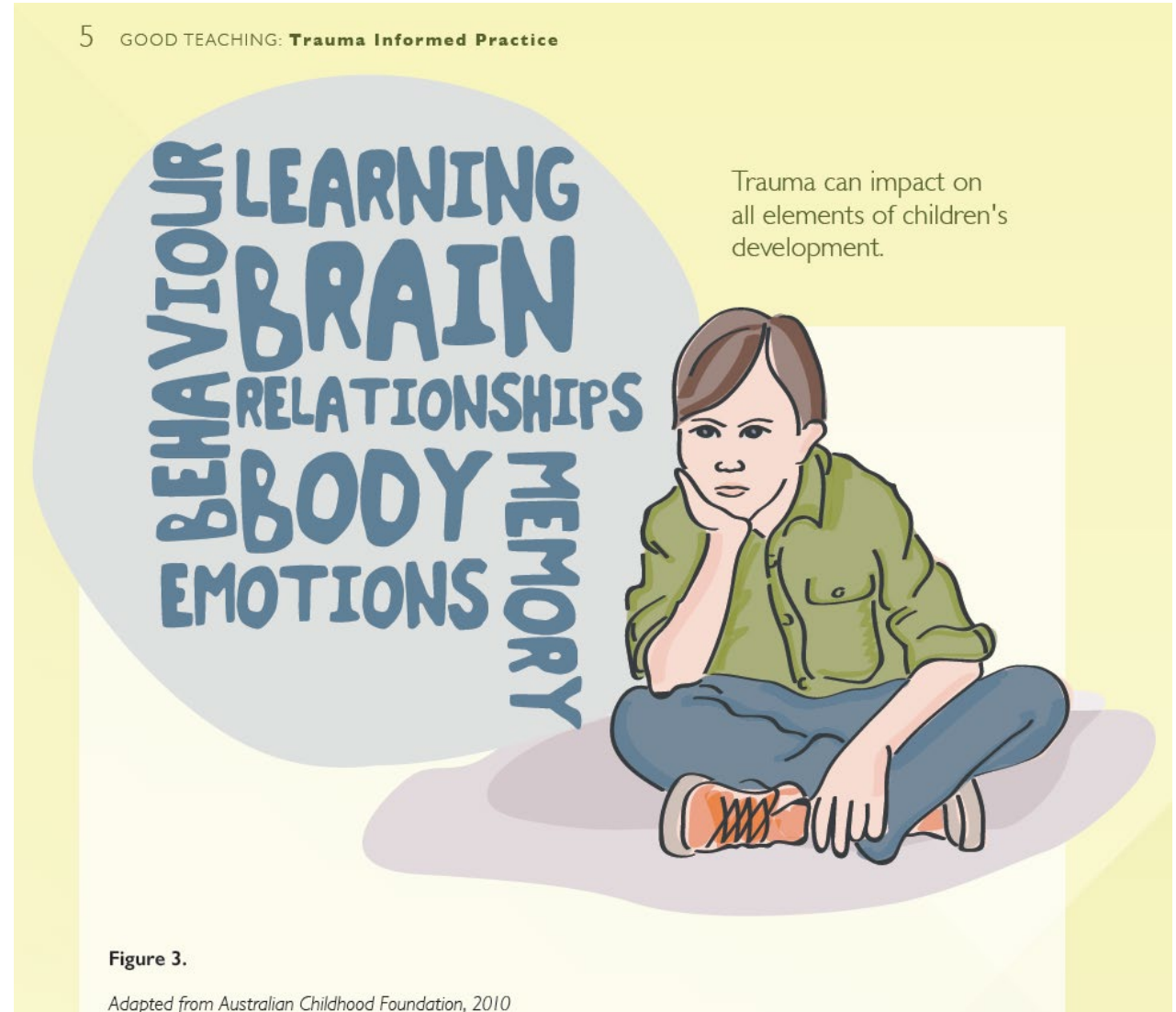


Care and protection by others

Trauma Can Impact All parts of Development

Traumatic events occurring in the early years of a child's life influence:

- immune systems
- how feelings are expressed and managed
- behaviour and stress
- how relationships are formed
- communication skills
- intelligence
- physiological functions such as temperature and hormone production.





Brain Break



Introducing the Brain Break

Brain breaks are mental breaks designed to help students stay focused in class. (The Watson Institute, 2019)

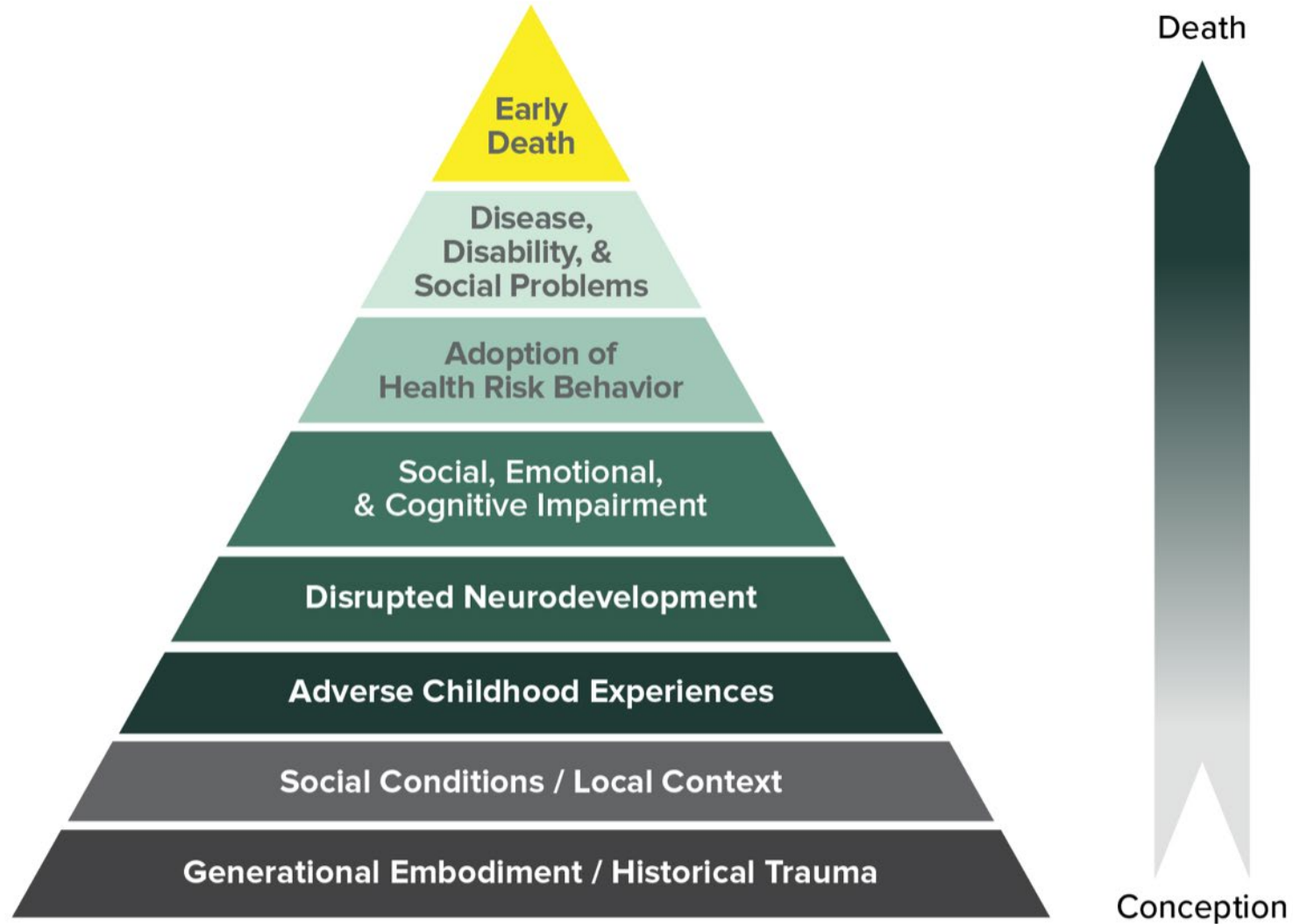
In general, there are **two types** of brain breaks:

The first type we use to **energise** or lift the mood in the room (for example the students have been sitting for a long period of time, the room is hot and the students are looking tired, the content is heavy in nature and so on). In this instance we do a brain break that will increase movement, make them laugh which in turn increases endorphins, oxygen levels and gets the blood circulating.

The second type we use to calm or **decrease the energy** in the room (for example the students have been outside on the playground and they have come in heightened, there has been an incident where adrenaline is high, they are excited for an activity coming later in the day and so on). In this instance we do a brain break that will decrease movement, make them concentrate on breathing and/or mindfulness which in turn reduces their heart rate and helps them become present in the moment.

Adverse Childhood Experiences (ACEs)

ACEs Pyramid

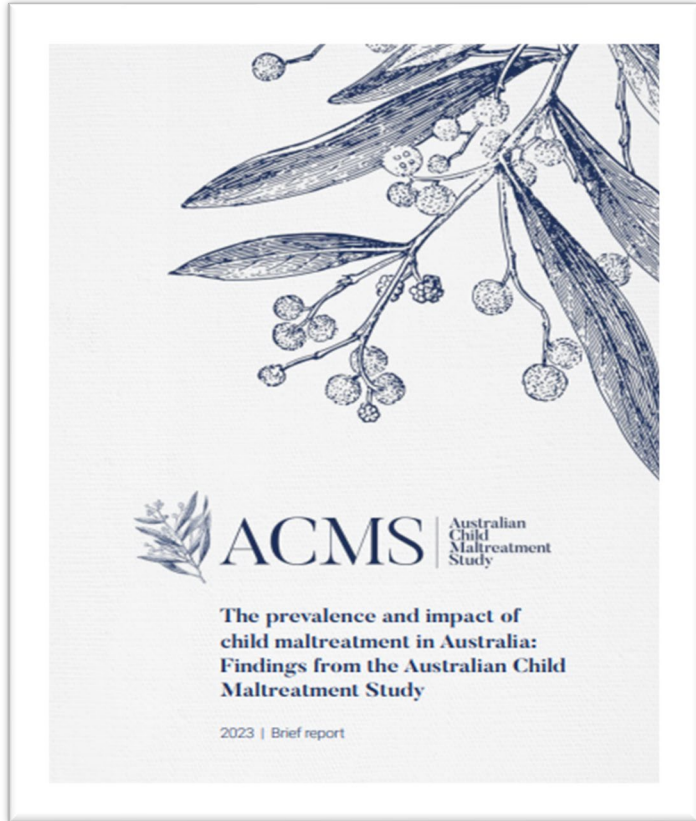


Mechanism by which Adverse Childhood Experiences Influence Health and Well-being Throughout the Lifespan

Prevalence of Childhood Trauma

Australian Child Maltreatment Study (ACMS)

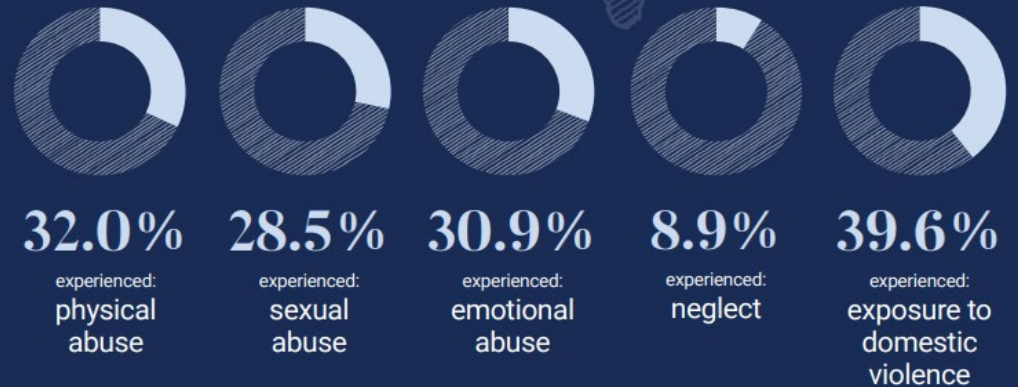
Brief Report Published 2023



Prevalence of child maltreatment among all Australians

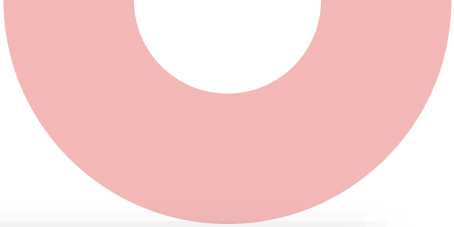
Our data show child maltreatment is widespread in Australia.¹³ In total 62.2% of the Australian population had experienced at least one type of child maltreatment. Exposure to domestic violence was the most common form of maltreatment, followed by physical abuse, emotional abuse, and sexual abuse. The least common type of maltreatment was neglect.

Among all **Australians**
aged 16-65 years and older



¹³ Mathews B, Pacella RE, Scott JG, Finkelhor D, Meinck F, Higgins DJ, Erskine HE, Thomas HJ, Lawrence D, Haslam DM, Malacova E, Dunne MP. The prevalence of child maltreatment in Australia: findings from a national survey. Med J Aust 2023; 218 (6 Suppl): S13-S18.

Australian Child Maltreatment Study (ACMS)



Mental health disorders*

- Major depressive disorder
- Post-traumatic stress disorder
- Generalised anxiety disorder
- Alcohol use disorder



Health Risk Behaviours

- Tobacco use
- Binge drinking
- Obesity
- Cannabis dependence
- Self-harm
- Suicide attempts



Health service use

- Hospital admissions
- GP visits
- Mental health consultations
- Physical health consultations

Australian Child Maltreatment Study (ACMS)

Published Findings, 2023

Child maltreatment is widespread

Girls experience particularly high rates of sexual abuse and emotional abuse

Is a major problem affecting today's Australian children and youth – it is not just something that happened in the past

Is associated with severe mental health, behavioural and social problems and behavioural, both in childhood and adulthood

Is associated with severe health risk behaviours, both in childhood and adulthood

Emotional abuse is particularly harmful, and is much more damaging than society has understood

Positive Experiences matter & YOU matter!!!

“ The more healthy relationships a child has, the more likely he will be to recover from trauma and thrive. Relationships are the agents of change and the most powerful therapy is human love.

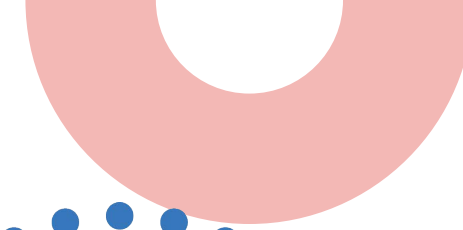
People, not programmes, change people”.

Dr Bruce Perry



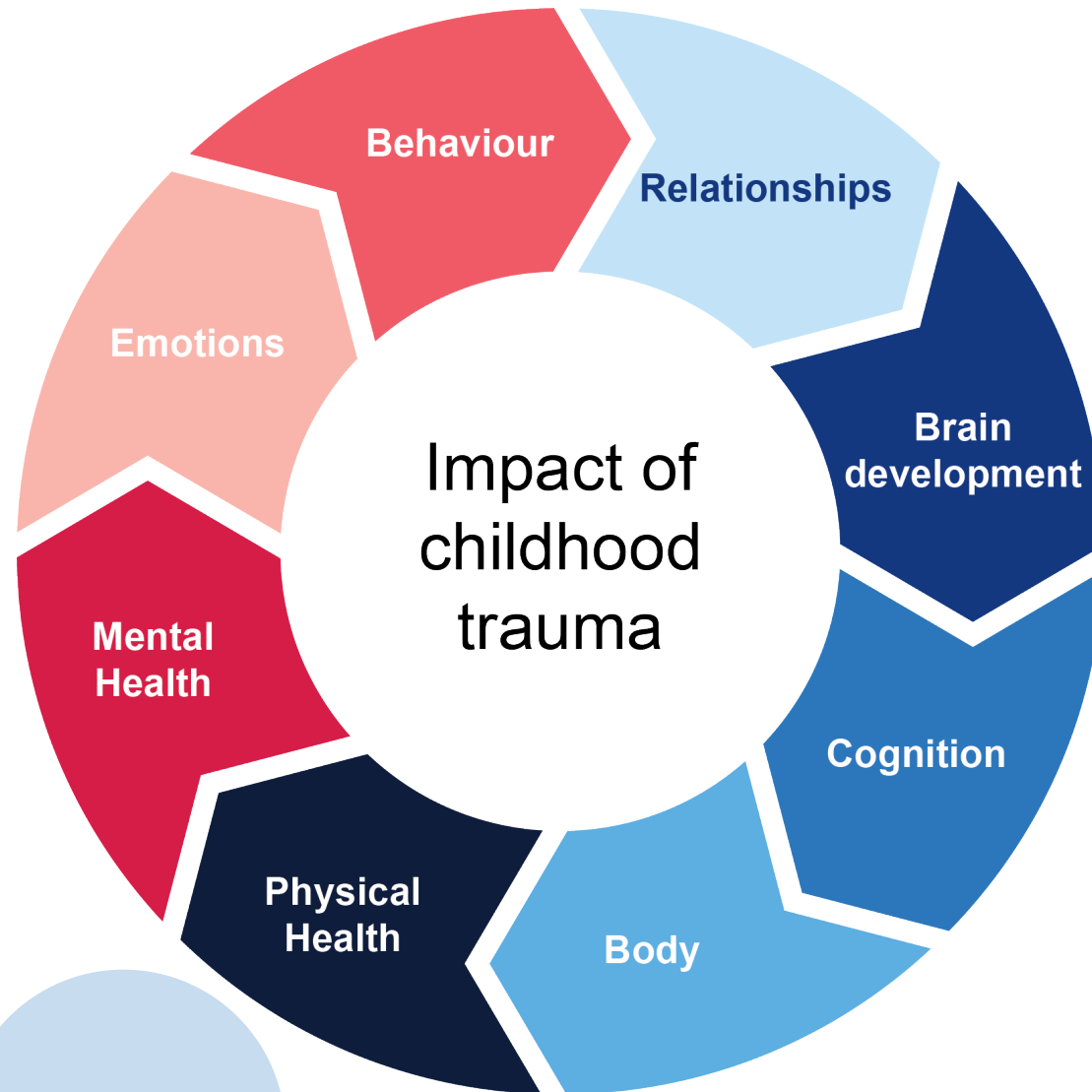
The impact of childhood trauma in schools

Let's go back to our story





The impact of childhood trauma in schools



Not all students impacted by trauma will present with volatile behaviour

A bit clumsy or ungainly

Unstable friendships

Poor or inconsistent memory

Expressive/receptive language issues

Learning difficulties

Attention deficits

Often seems vague or "zoned out"

Trauma Informed education

“It is a way of **thinking, understanding, believing and acting** so that the harm that complex trauma exerts on the functioning of students is **minimised or alleviated**, leading to **improved (education and life) outcomes.**”

National Guidelines for Trauma Aware Education.

Dr Judith Howard (QUT)



Trauma Informed Education – why is this important?

Trauma-informed practice in education recognises and acknowledges:

- Working with children, young people and adults in the education system will involve working with individuals experiencing trauma or with a trauma history
- The high prevalence and wide-ranging impact of trauma on the lives of students and their families and schools
- Traumatic experiences can have long-lasting effects on students' physical, emotional, and psychological wellbeing, which can significantly hinder their ability to learn and thrive in an educational setting
- There is impact on staff working with students who are impacted by trauma
- Adults supporting students (parents, caregivers, staff) may themselves be impacted by trauma



**Enhancing
Student and
staff Wellbeing**



**Building
Positive
relationships**



**Mitigating the
impact of
trauma**



**Addressing
behavioural
issues**



**Promoting
equity and
inclusivity**



**Working to
prevent further
traumatisation**

A Key Take Away Message

“ The more healthy relationships a child has, the more likely they will be to recover from trauma and thrive. **Relationships** are the agents of change and **the most** powerful therapy is human love. ”

Bruce Perry



Trauma-Informed Practice for Improved Learning and Wellbeing

Course overview

- Provides a foundational **understanding of childhood trauma**;
- Recognise the **signs that students have experienced trauma** and develop a repertoire of inclusive **strategies to mitigate** its impact
- It is intended to bring about a change to **whole school practice**
- Facilitates student engagement and behaviour based on **strengthened relationships**,



Every Child Needs a Champion!! Rita Pierson



Trauma-Informed Care is NOT:

- **Trauma therapy.** You don't need to be a clinician to support someone. Some people may also need trauma therapy, and that needs to be offered by a trained trauma therapist. However, there are many things that are therapeutic that can be just as transformative, or even more so. Building healing-centered relationships is an essential part of thriving.
- **A focus on the negative.** On the contrary, trauma-informed care should focus on healing and resilience. A trauma-informed approach educates service providers to be aware of how their words, attitudes, and behaviours can deeply affect someone who has experienced trauma and works to avoid retraumatizing people.
- **About justifying poor behaviour.** Trauma-informed care doesn't justify poor behaviour because someone is experiencing trauma. Trauma-informed care supports accountability, personal responsibility, and expectations around conduct. It supports people with compassion and empathy, and boundaries are also very important.
- **Just about being nice and kind.** Compassion is at the forefront of this work, but compassion isn't soft and flimsy. A compassionate approach is firm, has clear boundaries, and is grounded in love and empathy.
- **Babying people.** The goal of trauma-informed care is to avoid unnecessary retraumatisation. However, stress can't always be avoided. Attending post-secondary has some stressful elements that can't be avoided. It's also important for people to learn tools to cope with stress and difficult situations.
- **Just focused on the individual.** Trauma-informed care supports individuals, but it is a systems approach.

Trauma-Informed Practice for Improved Learning and Wellbeing

Understanding
childhood trauma

Impact of
childhood trauma
on the brain

Embedding
Trauma Informed
Practice in
schools

Support for
schools to
implement
Trauma Informed
Practice

Trauma-Informed Practice for Improved Learning and Wellbeing

1

Understanding
childhood
trauma

Provides the research basis for Trauma-informed practice. Participants learn **about type 1 and type 2 trauma**, the causes and **prevalence of childhood trauma**, the **Adverse Childhood Experiences Study** and the impact of **intergenerational trauma**. Participants empathise with students and develop an understanding of how trauma can impact all aspects of a person including, mental health, physical health and cognition. There is a strong emphasis on the importance of strong relationships to mitigate the impact of trauma.

Trauma-Informed Practice for Improved Learning and Wellbeing

2

Impact of
childhood trauma
on the brain

Explores the brain-science that underpins TIP, identifying the ways in which childhood trauma impacts brain development. Participants learn how the brain develops, that there are optimal windows for development and that different areas of the brain are responsible for thinking, feeling and reacting. Participants are introduced to the window of tolerance and how to recognise when students are able to regulate, relate and reason. The importance of attachments and relationships are highlighted.

Trauma-Informed Practice for Improved Learning and Wellbeing

3

Embedding
Trauma
Informed
Practice in
schools

Provides a range of strategies and approaches , both at an individual and a school-wide level, to assist students to regulate and relate, to enable them to spend more of their time within their window of tolerance.

Environmental and relational practices are unpacked to assist staff to develop strong relationships with students and to promote positive peer relationships. Participants build their understanding of the research evidence for connectedness, positive relationships and teaching pro-social skills.

Trauma-Informed Practice for Improved Learning and Wellbeing

4

Support for
schools to
implement
Trauma
Informed
Practice

Explores the impact of disadvantage and promoting equity over equality. Participants learn about “reason,” the final aspect of the window of tolerance, and are given whole-school and individual approaches to assist participants to promote student choice and regulation. The crisis cycle is explained and participants are provided with a range of tools to assist them to embed TIP in their school including, the Wellbeing Framework, Making Space for Learning and Calmer Classrooms.

Resources for further professional development.

Author/owner	Resource/tool	Link
Australian Childhood Foundation	Making Space for Learning	https://australianchildhoodfoundation.crackerhq.com/pvl/9b20e31a6fa3c43f414af2fcb00fla52/pdf/68027be0-b83e-497e-b1a9-1a91ce27ad22
Child Safety Commissioner, State Government Victoria	Calmer Classrooms	https://earlytraumagrief.anu.edu.au/files/calmer_classrooms.pdf
Berry Street Education Model	Brain Break Books	https://www.berrystreet.org.au/shop/products/brain-breaks
DOE Wellbeing Hub	Brain Breaks	Brain break bops (studentwellbeinghub.edu.au)

Some books that Kristy often recommend:

Books

- ***What happened to you? Conversations on trauma, resilience and the healing brain*** by Dr Bruce Perry and Oprah Winfrey
- ***When the Adults Change everything changes*** by Paul Dix
- ***Creating trauma-informed strengths-based classrooms*** by Tom Brunzel and Jacolyn Norrish
- ***The Body Keeps the Score*** by Bessel van der Kolk
- ***The boy who was raised as a dog*** by Dr Bruce Perry and Maia Szalavitz

Books to use with children and young people.

- ***Dear You Love from your Brain*** by Karen Young (*Hey Sigmund*);
- ***Hey Awesome*** by Karen Young (*Hey Sigmund*);
- ***But we're not lions*** by Karen Young (*Hey Sigmund*);

YouTube link for Rita 😊

https://www.bing.com/ck/a?!&p=b261f88f8aa48252JmltdHM9MTcxMTA2NTYwMCZpZ3VpZD0xNjhmYjVkJi02M2E3LTYwOWltMjE4NC1hMTkwNjI3NDYxMmlmaW5zaWQ9NTIwNg&ptn=3&ver=2&hsh=3&fclid=168fb5db-63a7-609b-2184-a1906274612b&psq=youtube+every+child+needs+a+champion&u=a1aHR0cHM6Ly93d3cueW91dHViZS5jb20vd2F0Y2g_dj1TRm5NVEhoS2Rrdw&ntb=1