

A Closer Look at Trauma Informed Practice



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Introduction

This resource is intended to be used alongside Renfrewshire Educational Psychology Service's 'Nurturing Wellbeing to Build Back Better' resources, which can be found on our Blog (https://blogs.glowscotland.org.uk/re/renfrewshireedpsych/):

- 'Nurturing Wellbeing to Build Back Better: A Summary of Trauma Informed Priorities for Educational Establishments.'
- 'Nurturing Wellbeing to Build Back Better: A Trauma Informed Resource.'

The suggestions provided within these resources will support most staff, children and young people, families and educational communities in recovering well from the effects of COVID-19. However, those who have been most severely affected, or who have had other traumatic experiences in their lives, may benefit from the more trauma specific approaches detailed in this resource. This resource also contains more detail about the theory behind the trauma approaches recommended and more extensive suggestions for resources and further reading for those who want to find out more. It gives guidance for planning a whole establishment approach to supporting those experiencing trauma. These resources are intended for educational establishments and are not a substitute for trauma- specific interventions from trained professionals.

Self Care

Talking about trauma can be distressing, so please be aware that some of the content may be personally relevant to you. If this is the case, please look at the self-care section in this document in the first instance. If you are worried about yourself or someone else who has experienced trauma, please seek help from trusted family or friends, your employer or contact NSPCC, Samaritans or local health care practitioners.

Why do we need a trauma informed approach during the COVID -19 pandemic?

As we navigate through the Coronavirus (COVID-19) pandemic and consider the recovery from it, nurture, ACES, and trauma informed approaches will be needed more than ever. These will help education communities to create safe and supportive environments so that children and young people can learn, educators can teach, and families are supported.

The COVID-19 pandemic has brought significant change into all our lives, for example: changes to routines, remote learning or working, social distancing, lack of contact with friends, family and professional agencies, loss and bereavement. While *everyone* is experiencing the anxiety and stress associated with this unprecedented situation, the effects of COVID-19 on individuals will vary greatly. SAHMSA's (2014) concept of trauma based on "3 E's" provides a helpful framework for thinking about how circumstances brought about by, or exacerbated by, COVID-19 may have affected some people more than others depending on:

- The EXPOSURE to events;
- How the individual EXPERIENCED the events, including the relative amounts of risk and protective factors, and;
- What the EFFECTS were.

Bartlett, Griffin & Thomson (2020) explain that many staff, children and young people and their families will have experienced some anxiety, stress or loss which may result in a range of normal, short term stress responses and many will return to typical functioning. For others, the effects of COVID-19 will put them





at higher risk of developing mental health conditions including trauma related conditions, anxiety and depression. Children and young people with prior trauma, pre-existing mental health conditions, economic instability and substance misuse are at particularly high risk.



Information: Definitions of Common Terms

Trauma

"...a psychologically distressing event that is outside the range of normal childhood experience and involves a sense of intense fear, terror and helplessness"

(Perry, 2002 p12)

"an event, or a series of events or a set of circumstances that is experienced by an individual as either physically or mentally harmful or life threatening."

(SAMHSA, 2014, P7)

Trauma describes both the experience and its short and long-term effects on behaviour, emotions, learning, memory, and relationships (Webster, 2020). Trauma often happens in the context of relationships where it usually involves a loss of power and is infused with stigma and shame (see ACES below). COVID-19 has introduced trauma on a community and worldwide scale, and for some this adds to existing traumatic experiences in their lives.

Adverse Childhood Experiences (ACEs)

"The events and conditions in child or young person's environment that cause chronic stress"

Scottish Public Health Network (2016)

The term 'Adverse Childhood Experiences' was originally developed in the United States in the context of the Adverse Childhood Experiences (ACE) study. The environmental events or conditions which are thought of as ACEs have been subdivided into the categories, as shown in table 1 below.

Abuse

- Emotional
- Physical
- Sexual

Neglect

- Emotional
- Physical

Household Adversity

- Domestic violence
- Household substance misuse
- Household mental ill health
- Criminality
- Separation
- Living in care

Table 1: ACEs as categorised by Felleti, Anda et al (1998)





Understanding Trauma

NHS Education Scotland advocate that the high prevalence of trauma and its effects on people's lives means that "Trauma is everybody's business" (NHS Education Scotland, 2017 p7). Understanding trauma and its effects enables us to respond helpfully and to identify when further support or intervention may be necessary.

The following key points can help us to understand trauma:

- Children and young people do not necessarily develop long lasting difficulties following exposure to trauma.
- Many factors influence the impact of trauma (see the 3E's above).
- Safe and supportive relationships are a key buffer to the stressful impact of traumatic events.
- Children and young people react to trauma in different ways at different developmental stages.
- Adversity and trauma can result in higher stress levels and reduced ability to cope.
- Trauma can impact on all aspects of a child or young person's development to varying degrees including their body, emotions, behaviour, relationships, memory and learning.
- Recovery from and transformation through trauma is possible.

Types of Trauma

Different types of trauma which can impact people in different ways and to varying degrees have been identified:

- Type 1 trauma: Single incident such as a car accident, house fire, earthquake, etc. For some, the COVID-19 Pandemic may be this type of trauma. For others, the longer it goes on it could become a Type 2 trauma.
- Type 2 trauma: Multiple incidences of ACES and trauma such as war, child abuse, bullying, domestic violence. For some, the COVID-19 Pandemic is an additional trauma to these.
- Type 3 Developmental trauma: 'is the term used to describe the impact of early, repeated abuse, neglect, separation and adverse experiences that happens within the child's important relationships.' (Beacon House, 2019)
- Trauma Continuum

 Type 3

 Type 2

 Multiple
 Type 1

 Type 2

 Multiple ongoing

 traumas from

 an early age

 Sometimes called

 Developmental Trauma

Figure 1: The Trauma Continuum (Solomon & Heide, 1999)

• **Post-Traumatic Stress Disorder:** is a neuropsychiatric disorder that may develop following a traumatic event that includes changes in emotional, behavioural and physiological functioning (Perry, 2014).

Recognising Trauma

Look out for adults, children and young people who may be showing signs of trauma. These responses are often a result of fight, flight, freeze, submit reactions; natural reactions designed to keep us safe.

- In **FLIGHT** mode we run away to escape threat or danger.
- In **FIGHT** mode we attack and defend to protect ourselves.
- In **FREEZE** mode we become still, not moving, in the hope that threat or danger doesn't notice us and goes away.





• In **SUBMIT** mode, we do what we are told, because our brain is trying to protect itself from the overwhelming stress caused by the danger by partly shutting down. This can lead to dissociation, an experience of being disconnected from ourselves and the world around us.

These reactions can persist even when the adult, child or young person is no longer in the stressful or dangerous situation. An awareness of this helps us to recognise, understand and respond skilfully to the behaviour displayed. See Inner World and Beacon House resources for further information.

The table below contains a guide to some of the behaviours to look out for. It is only a guide, not an exhaustive nor a diagnostic tool.

Young children	Middle childhood	Adolescents
 Exaggerated physical, 	Appearing sad or tearful	Difficulty managing feelings
emotional and sensory	Pre-occupied by the events	Hiding /masking true feelings
responses	 Sensory overload: smell, touch, 	Concerned about themselves or
 Crying frequently 	noise	their family
Irritable	Avoiding situations	Confrontational
Difficult to soothe	Difficulty concentrating and	 Showing signs of guilt and
Tantrums	remembering	shame
Easily startled	 Physical symptoms, such as 	Aggressive behaviour
 Demanding and clingy 	headaches and stomach aches	 Engaging in risky behaviours
 Play that 'acts out' trauma 	that have no other known	
 Scared, especially at night 	cause.	
Bed wetting		

Table 2: Adapted from Australian Childhood Foundation, 2018 and NHS Training module 'Introduction to Trauma in Children and Young People and Their Families '

Vulnerable (sometimes known as Valuable) Children and Young People

The National Child Traumatic Stress Network (www.NCTSN.org) reminds us to pay particular attention to children and young people who already have identified histories of trauma, as well as being mindful of children and young people:

- With a history of anxiety.
- Who have had episodes of depression or suicidal ideation.
- With learning and attention disorders.
- With a history of child abuse or domestic abuse.
- Who are care experienced. (See British Psychological Society Guidance (2020) for issues to consider when supporting care experienced adults, children and young people).
- Whose families may have lost jobs or income.
- With loved ones particularly vulnerable to the COVID-19 virus.
- Whose caregivers are healthcare workers, or who work in occupations with potential exposure to the virus.
- Whose parents are divorced, separated, or live in different locations.
- Who are experiencing less supervision because of caregivers' work schedules.

Young carers could also be potentially more vulnerable at this time, as their caring responsibilities may have increased due to less support being available from caring agencies, and whose protective factors, such as school and seeing relatives and friends, have reduced.





Bereavement and Loss

Many children and young people will have experienced loss or bereavement during the COVID-19 pandemic. Losses during this time include illness, loss of familiar routines, loss of education, missing rites of passage and loss of connections with friends and family. Adults similarly will have experienced loss and bereavement. Being cut off from family, friends and communities is difficult for everyone, but especially for children and young people and families who are grieving for a loved one.

Experiencing intense feelings is a common, normal reaction to bereavement and loss and is part of the healing process. Sometimes we learn to live with the loss, but for some people the difficulties associated with it are prolonged and persistent and can result in mental health difficulties. Many of the trauma informed actions discussed in the following sections will support adults, children and young people through bereavement and loss. (See also the 'Transitions are important in young people's lives' section in 'Nurturing Wellbeing to Build Back Better: A Trauma Informed Resource', pages 15-16).

In some instances, specific support may be helpful too. See <u>Appendix 1</u> for an information sheet which includes signposting to bereavement specific support services.

Find out more about 'Understanding Trauma':

- NHS Scotland, Sowing Seeds Animation: https://vimeo.com/334642616
- Beacon House, 'Signs of Developmental Trauma': https://beaconhouse.org.uk/wp-content/uploads/2019/09/Developmental-Trauma-Summary-Sheet.pdf
- Inner World, 'What Survival Looks Like in Primary School': http://www.innerworldwork.co.uk/wp-content/uploads/2019/11/WSLLIPS-1-1.jpg
- Inner World, 'What survival looks like in the secondary school': https://beaconhouse.org.uk/wp-content/uploads/2019/09/Survival-In-Secondary-School.pdf
- British Psychological Society (2020), 'Supporting care-experienced children and young people during the Covid-19 crisis and its aftermath' https://www.bps.org.uk/coronavirus-resources/public/supporting-care-experienced-children
- See <u>Appendix 1</u> for an information sheet on Bereavement and Loss





Developing Your Response to Trauma

A Trauma Informed Approach: Key Assumptions

The SAMHSA (2014) 'Concept of Trauma and Guidance for a Trauma Informed Approach' is based on 4 key assumptions known as the 4 Rs. REALISE, RECOGNISE, REPSOND, RESIST:

- 1. Realise the widespread prevalence and impact of trauma and potential paths for recovery.
- 2. **Recognise** the signs and symptoms of trauma: know what it might look like among children and young people and the adults around them. (See table 2 in 'Recognising Trauma' section).
- 3. **Respond** to someone who is traumatised by knowing what to do and how to help.
- 4. **Resist Re-traumatisation** of individuals as we respond to their unique and changing needs.

A 5th **R - Relationships matter** has also been proposed by Scottish Trauma Informed Leaders Training (STILT, developed by NHS Education for Scotland), to recognise that trauma informed practice puts **relationships** at the centre of all work.

Trauma, Relationships and Nurturing Approaches

Developing trauma informed practice can be achieved through nurturing approaches and positive relationships. It is not accomplished through any single technique, strategy or checklist and does not always require specialist therapy.

The links between nurture, ACES and trauma are outlined in the Education Scotland document: 'Nurture, Adverse Childhood Experiences and Trauma Informed Practice: Making the links between these approaches' (2018). A model of good practice is also provided.



Figure 2: Nurture, ACES & Trauma (Education Scotland, 2018)

Good Practice within a Nurturing, ACEs aware and Trauma Informed Educational Context

(Taken from 'Nurture, Adverse Childhood Experiences and Trauma informed practice: Making the links between these approaches' (Education Scotland, 2018)

- Safe, secure, flexible and caring environments where positive relationships are seen as being fundamental.
- A whole school focus on wellbeing; social and emotional learning and the building of resilience.
- An awareness of the impact of Adverse Childhood Experiences and trauma across the whole school community (including staff and parents/carers).
- Assessment and planning that has a focus on what has <u>happened</u> to an individual rather than what
 is wrong with an individual.
- Identification of developmentally appropriate supports that promote self-regulation.
- A range of universal whole school approaches that enhance the wellbeing of all children and young people alongside targeted support for those most affected that is proportionate and meets the needs of these children and young people.
- Senior Leadership Teams and **practitioners who are reflective and supportive in their practice** and recognise the importance of the wellbeing needs across the establishment community.





 Establishments are able to take forward many features of highly effective practice as outlined in How Good is Our School? 4 (HGIOS 4), e.g. All staff and partners model behaviour which promotes and supports the wellbeing of all.

These principles are fundamental to, and embedded within, RNRA and the 'Nurturing Wellbeing to Build Back Better' resources.

Why are Relationships so Important?

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

(Perry, 2006)

Figure 3 illustrates three core principles to improve outcomes for children and families identified by Harvard Centre of Child Development, 2017:

- Responsive Relationships with adults; these have a
 double benefit, both promoting healthy brain
 development and providing the buffering protection
 needed to prevent very challenging experiences from
 producing a toxic stress response.
- Strengthen core life skills; the ability to focus, plan for and achieve goals, adapt to changing situations and resist impulsive behaviour.
- Reduce sources of stress; reduce the 'pile-up' of potential sources of stress to protect children and young people directly (i.e. their stress response is triggered less frequently and powerfully) and also indirectly so that the adults the children depend on are better able to protect and support them.

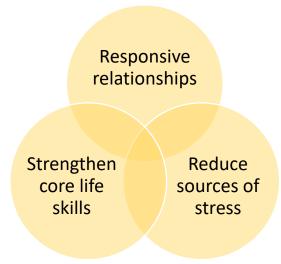


Figure 3: Core Principles to Improve Outcomes (Harvard Centre of Child Development, 2017)

We should be aware that where trauma happens in the context of relationships that children and young people can learn that nobody can be trusted. This can make it hard for them to make and keep safe and supportive relationships and to reach out for support when a trauma, such as COVID-19, occurs.

Evidence tells us that the presence of one **SAFE**, **SUPPORTIVE**, **DEEPENDABLE**, **RESPONSIVE** adult in a child or young person's life can buffer the effects of trauma, helping to restore and rebuild their wellbeing and in turn improve their life chances. There is no expectation for educational staff to provide therapy, but Dr Karen Treisman, Clinical Psychologist, encourages us to consider the possibility that:

'Every interaction is an intervention. Every moment or interaction can be positive or negative, it can be a snake or a ladder, it has the potential to open a door or close, it can be trauma inducing or reducing.

A positive moment can provide an experience that is a stepping stone to new possibilities and experiences.'

(Treisman, 2020)





Wellbeing: Monitoring, Assessing and Planning

The SHANARRI wellbeing indicators and RNRA approaches can be used with a trauma informed lens to increase children and young people's protective factors and resilience and to identify and reduce their adversity and vulnerability.

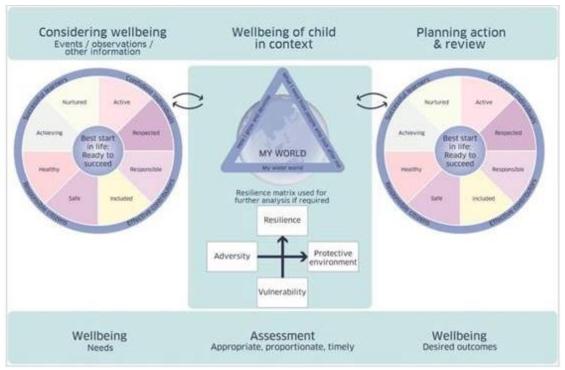


Figure 4: GIRFEC National Practice Model (The Scottish Government, 2016)

Please see Appendix 2 for a resource to support you to plan and evaluate your approach to developing trauma informed practice.

Find out more about 'Developing your Response to Trauma' through nurturing relationships:

- Centre on the Developing Child, '3 Principles to Improve Outcomes for Children and Families': https://46y5eh11fhgw3ve3ytpwxt9r-wpengine.netdna-ssl.com/wp-content/uploads/2017/10/HCDC 3PrinciplesPolicyPractice.pdf
- Dr Karen Treisman explains her quote 'Every interaction is an intervention': https://youtu.be/8pBkXbCP3Q4
- The Child Trauma Academy, Dr Bruce Perry. 'Helping Traumatized Children: A Brief Overview for Caregivers' offers invaluable advice about talking to children (including infants) and young people about traumatic events: https://7079168e-705a-4dc7-be05-2218087aa989.filesusr.com/ugd/aa51c7 237459a7e16b4b7e9d2c4837c908eefe.pdf
- See <u>Appendix 2</u> for a planning resource to support the development of trauma informed approaches.
- See <u>Appendix 3</u> for some reflective questions which can help to guide your interactions.
- See <u>Appendix 4</u> for ideas about how you can provide reassurance and comfort whilst physically distancing.
- See <u>Appendix 5</u> for examples of trauma informed actions which will help to reconnect, rebuild, repair and resist traumatisation. Links to Nurture Principles are detailed.
- See Appendix 6 for an information sheet with ideas for calming activities.





Developing a Trauma Informed Approach to Staff Wellbeing

Taking on board the key assumptions in trauma informed approaches (realise, recognise, respond, resist retraumatisation and relationships matter) can also help us to provide safe, supportive environments for staff and the families of our children and young people. Many of the trauma actions suggested for children and young people will also be useful when considering support for staff.

It is important to bear in mind that it can be physically and mentally draining to support the effects of trauma, and this can lead to practitioners developing their own symptoms of traumatic stress. This is known as secondary traumatic stress. In a trauma informed establishment, practitioners should be aware of the signs of secondary traumatic stress in themselves and their colleagues. Good organisational structures and processes to promote and protect staff wellbeing are essential, alongside encouraging practitioners to practice self-care.

For general information and advice about staff wellbeing, please refer to page 4 of 'Nurturing Wellbeing to Build Back Better: A Summary of Trauma Informed Priorities for Educational Establishments'. The extended resource ('Nurturing Wellbeing to Build Back Better: A Trauma Informed Resource) contains important considerations for ways to support staff wellbeing throughout the Nurture Principle sections.

The following suggestions from The National Child Traumatic Stress Network may also be useful:

- Check in with staff both collectively and individually. Encourage them to take time to manage their stress and take care of themselves and their families.
- Identify and distribute resources for staff who may need additional screening, assessment, and/or treatment for stress, mental health issues, or secondary traumatic stress symptoms.
- Many mental health resources are now available via video consultation. Identify a range of resources that you can provide for your staff.
- Validate your staff members' concerns about children and young people.
- Create opportunities for staff to connect to one another, through peer check-ins or using professional development time to reflect and process.

Find out more about 'A Trauma Informed Approach to Staff Wellbeing'

- British Medical Association (BMA, 2020) 'Vicarious trauma: signs and strategies for coping':
 https://www.bma.org.uk/advice-and-support/your-wellbeing/vicarious-trauma/vicarious-trauma-signs-and-strategies-for-coping
- Trauma Aware Schools, 'Secondary Traumatic Stress': https://traumaawareschools.org/secondaryStress
- Dr Bruce Perry discusses a range of regulatory techniques to support staff wellbeing which can be built into the school day:
 - https://www.youtube.com/watch?v=VcDTXJpCMiY&feature=youtu.be&app=desktop
- '10 steps to staff wellbeing' Anna Freud Centre:

 https://www.annafreud.org/what-we-do/schools-in-mind/resources-for-schools/ten-steps-towards-school-staff-wellbeing/
- Mind UK, 'Wellness Action Plan':
 https://www.mind.org.uk/workplace/mental-health-at-work/taking-care-of-your-staff/employer-resources/wellness-action-plan-download/





References

Australian Childhood Foundation, (2018). *Making Space for Learning; Trauma informed practice in schools*. Retrieved from http://det.wa.edu.au/childprotection/detcms/inclusiveeducation/child-protection/public/files/making-space-for-learning---trauma-informed-practice-in-schools.en

Bartlett J.D., Griffin J. & Thomson D. (2020). Resources for Supporting Children's Emotional Wellbeing During the Covid-19 Pandemic. Retrieved from https://www.childtrends.org/publications/resources-for-supporting-childrens-emotional-well-being-during-the-covid-19-pandemic

Beacon House, (Retrieved May 2020). *Signs of Developmental Trauma at Home and School.* Retrieved from https://beaconhouse.org.uk/wp-content/uploads/2019/09/Developmental-Trauma-Summary-Sheet.pdf

British Medical Association, (2019). *Vicarious trauma: Signs and strategies for coping*. Retrieved from https://www.bma.org.uk/advice-and-support/your-wellbeing/vicarious-trauma/vicarious-trauma-signs-and-strategies-for-coping

Brown, B. (2020). Retrieved from https://brenebrown.com/

Centre on the Developing Child, (2017). *3 Principles to Improve Outcomes for Children and Families*. Retrieved from

https://46y5eh11fhgw3ve3ytpwxt9r-wpengine.netdna-ssl.com/wp-content/uploads/2017/10/HCDC_3PrinciplesPolicyPractice.pd f

De Thierry B. (2014). *An understanding of Trauma and ACEs.* Retrieved from https://www.trc-uk.org/an-understanding-of-trauma/

Education Scotland (2017). *Applying nurture as a whole school approach - A framework to support self-evaluation*. Retrieved from https://education.gov.scot/improvement/self-evaluation/applying-nurture-as-a-whole-school-approach-a-framework-to-support-self-evaluation/

Education Scotland (2018). *Nurture, Adverse Childhood Experiences and Trauma informed practice: Making the links between these approaches* Retrieved from https://education.gov.scot/improvement/Documents/inc83-making-the-links-nurture-ACES-and-trauma.pdf

Felliti, V. J, Anda, R. F et al. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults. The Adverse Childhood Experiences (ACE) Study. *American Journal of Preventative Medicine*, 14, 245-258.

NHS Education for Scotland, (2017). Transforming Psychological Trauma: A knowledge and Skills Framework for the Scottish Workforce. Retrieved from

https://www.nes.scot.nhs.uk/media/3971582/nationaltraumatrainingframework.pdf

NHS Health Scotland, (2017). *Tackling the attainment gap by preventing and responding to Adverse Childhood Experiences (ACEs)*. Retrieved from http://www.healthscotland.scot/publications/tackling-the-attainment-gap-by-preventing-and-responding-toadverse-childhood-experiences

Perry, B. & Szalavitz, M. (2006). The Boy Who Was Raised as a Dog. Basic Books: New York





Perry, B. (2014). Helping Traumatized Children: A Brief Overview for Caregivers. Retrieved from https://7079168e-705a-4dc7-be05-

2218087aa989.filesusr.com/ugd/aa51c7_237459a7e16b4b7e9d2c4837c908eefe.pdf

Perry, B. (2014). *Rhythm Regulates the Brain*. Retrieved from https://attachmentdisorderhealing.com/developmental-trauma-3/

Scottish Public Health Network, (2016). *Polishing the Diamonds: Addressing Adverse Childhood Experiences in Scotland*. Retrieved from https://www.scotphn.net/wp-content/uploads/2016/05/2016 05 26-ACE-Report-Final2.pdf

Substance Abuse and Mental Health Administration, (2014). *Concept of trauma and Guidance for a trauma informed approach.* Retrieved from

https://store.samhsa.gov/product/SAMHSA-s-Concept-of-Trauma-and-Guidance-for-a-Trauma-Informed-Approach/SMA14-4884

Treisman, K. (2020). *Every interaction can be an intervention*. Retrieved from https://www.youtube.com/watch?v=8pBkXbCP3Q4&feature=youtu.be

The National Child Traumatic Stress Network. *Trauma-Informed School Strategies during COVID-19*. Retrieved from https://www.nctsn.org/resources/trauma-informed-school-strategies-during-covid-19

Webster, M. (2002). *Merriam-Webster Dictionary*. Retrieved from https://www.merriam-webster.com/dictionary/trauma







Information and Resources

Professional Development & Information

NHS Scotland Informative Videos

Sowing Seeds Animation: Explains the impact of trauma and how to adapt the way we work to make a positive difference to the lives of children and young people affected by trauma.

https://vimeo.com/334642616

Opening Doors: Trauma Informed Practice for the Workforce: supports workers knowledge of how to adapt the way they work to make a positive difference to people affected by trauma and adversity. Trauma is everybody's business.

https://vimeo.com/274703693



An extensive resource of videos explaining how to support children and young people during the COVID-19 pandemic.

https://www.traumainformedschools.co.uk/resources

Inner World Resources

Information about how children and young people respond to and survive trauma at home .

http://www.innerworldwork.co.uk/?page_id=327

Information about how children and young people respond to and survive trauma at primary and secondary school.

http://www.innerworldwork.co.uk/wp-content/uploads/2019/11/WSLLIPS-1-1.jpg

Dr Karen Treisman's Videos

Bereavement and Loss: Dr Karen Treisman discusses bereavement and loss during COVID-19. https://www.youtube.com/watch?v=n9a79NeUARo

Re-traumatisation: Dr Karen Treisman discusses how previous traumas and coping responses can re-surface as a result of COVID-19.

https://www.youtube.com/watch?v=msNO7ZmLXns&list=TLPQMjgwNTlwMjD41iSnFr8Yrg&index=1

Resources and publications

Beacon House

Trauma sensitive school resources bank provides lists of recommended books https://beaconhouse.org.uk/wp-content/uploads/2019/09/Schools-Resources-List-2.pdf

Calming Anxiety using Brainstem Calmers: simple activities involving patterned, repetitive, rhythmic activities that help to regulate the nervous system.

https://beaconhouse.org.uk/wp-content/uploads/2019/09/Brainstem-Calmer-Activities.pdf

















Education Scotland

Education Scotland *The Compassionate and Connected Classroom: A Health and Wellbeing Curricular Resource for Upper Primary.*

https://education.gov.scot/improvement/learning-resources/compassionate-and-connected-classroom

HSC: South Eastern Health and Social Care Trust

Bend Don't Break: Building strengths that build resilience. http://www.setrust.hscni.net/pdf/Bend_Dont_Break_final.pdf

University of Massachusetts: Child Trauma Training Centre

Extensive resources including: Mindfulness Activity Booklet; Emotional Literacy Activity Booklet; Kids Coronavirus Book

https://umassmed.edu/cttc/dmh--other-resources/covid-19-resources/Activity-booklets-for-children/

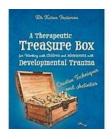
Dr Karen Treisman

A Therapeutic Treasure Box: for working with children and young people and adolescents with developmental trauma, (2017). Jessica Kingsley Publishers.

Barnardos

Inspiration and simple activities for *Looking After Your Heart, Body and Mind*https://www.barnardos.ie/how-you-can-help/fundraising/covid-19-crisis-appeal-for-children and young people/heart-body-and-mind











Appendix 1: Bereavement and Loss Information Sheet

Many children and young people will have experienced loss or bereavement during the COVID-19 pandemic. Losses during this time include: illness, loss of familiar routines, loss of education, missing rites of passage and loss of connections with friends and family. Adults similarly will have experienced bereavement and loss. Being cut off from family, friends and communities is difficult for everyone, but especially for children, young people and families who are grieving for a loved one.

Experiencing intense feelings is a common, normal reaction to be reavement and loss and part of the healing process. Sometimes we learn to live with the loss, but for some people the difficulties associated with it are prolonged and persistent and can result in mental health difficulties. Many of the actions detailed in this resource will support children and young people through be reavement and loss, however more specific support may be helpful too:



Winston's Wish supports children and young people after the death of a parent or a sibling. 'This is one of the most devastating losses a child will ever face.' The website provides resources and guidance from the experienced team supporting children and young people through coronavirus, including information on topics such

as telling a child someone is seriously ill or has died from coronavirus, how schools can support bereaved students and how to say goodbye if you can't attend a funeral. https://www.winstonswish.org/coronavirus/



Seasons for Growth: Children and young people and adults can also be offered to join a Seasons for Growth group in their establishment or community. This is an 8-week education programme that aims to support children and young people cope

with grief and loss. It is based upon J. William Worden's 'Tasks of Grief' and the metaphor of the seasons helps children and young people to understand that grief is cyclical; there is no end point, and while some days will be summery and light others will feel cold, dark and wintry. Members of the Home Link Service deliver this Resource. http://www.seasonsforgrowth.org.uk/



Childhood Bereavement Network have specific information, guidance and resources about bereavement during the COVID-19 pandemic, including 'how to stay connected when you can't be with someone who is so ill they might die' and cards that bereaved young people can use during the lockdown to reach out for

support from their parent or carer, friend and school.

http://www.childhoodbereavementnetwork.org.uk/help-around-a-death/covid-19.aspx



Cruse Bereavement Care offer support, advice and information to children, young people and adults when someone dies. The website provides COVID-19 specific guidance around a number of topics, including talking to children and young people about death related to COVID-19 and advice for employers/colleagues when an

employee/colleague is bereaved or dies.

https://www.cruse.org.uk/get-help/coronavirus-dealing-bereavement-and-grief



Hope Again is the youth website of Cruse Bereavement Care, providing support for children and young people coping with loss.

https://www.hopeagain.org.uk/





Appendix 2: Planning and evaluating your approach

Transforming Psychological Trauma Informed Leaders video series. Gail Nowek (Education Scotland) talks about the importance of trauma informed education in schools.

https://www.nes.scot.nhs.uk/education-and-training/by discipline/psychology/multiprofessional-psychology/national-traumatraining-framework/trauma-informed-organisation-in-practiceinterviews-with-scottish-leaders.aspx



Evaluation

Education Scotland Document Applying Nurture as a Whole School Approach contains 6 Quality indicators, features of effective practice and challenge questions that will guide and support an establishment's self-evaluation (pp 9-50). <a href="https://education.gov.scot/improvement/self-evaluation/applying-nurture-as-a-whole-school-approach-a-framework-to-support-self-evaluation/applying-nurture-as-a-whole-school-approach-a-framework-to-support-self-evaluation/applying-nurture-as-a-whole-school-approach-a-framework-to-support-self-evaluation/applying-nurture-as-a-whole-school-approach-a-framework-to-support-self-evaluation/applying-nurture-as-a-whole-school-approach-a-framework-to-support-self-evaluation/applying-nurture-as-a-whole-school-approach-a-framework-to-support-self-evaluation/applying-nurture-as-a-whole-school-approach-a-framework-to-support-self-evaluation/applying-nurture-as-a-whole-school-approach-a-framework-to-support-self-evaluation/applying-nurture-as-a-whole-school-approach-a-framework-to-support-self-evaluation/applying-nurture-as-a-whole-school-approach-a-framework-to-support-self-evaluation/applying-nurture-as-a-whole-school-approach-a-framework-to-support-self-evaluation/applying-nurture-as-a-whole-school-approach-a-framework-to-support-self-evaluation/applying-nurture-as-a-whole-school-approach-a-framework-to-support-self-evaluation/applying-nurture-as-a-whole-school-approach-a-framework-to-support-self-evaluation/applying-nurture-as-a-whole-school-approach-a-framework-to-support-self-evaluation/applying-nurture-as-a-whole-school-approach-a-framework-to-support-self-evaluation/applying-nurture-as-a-whole-school-approach-a-framework-to-support-self-evaluation/applying-nurture-as-a-whole-school-approach-a-framework-to-support-self-evaluation/applying-nurture-as-a-whole-school-approach-a-framework-to-support-self-evaluation/applying-nurture-as-a-whole-school-approach-a-framework-to-support-a-framework-a-framework-a-framework-a-framework-a-framework-a-framework-a-framework-a-framework-a-framewor



Reflection

Please use the questions below to reflect on your practice. You may wish to use the RNRA Action Plan document to guide and structure your planning.

- What are you already doing?
- What could you do more of?
- Is there anything you can stop doing?
- What information, resources or training do you need to move your practice forward?

Next Steps

Using the diagram on the next page, consider where you are now and what your vision is for your establishment. The diagram details the level of knowledge, skills and behaviours suggested for practitioners depending on their role.





Nurture, ACEs, trauma enhanced

staff have more regular and intense contact with individuals and/or direct and manage services

Nurture, ACEs, trauma skilled

staff have more in depth knowledge gained through professional learning and apply knowledge and skills gained directly through substantial contact with individuals

Nurture, ACEs, trauma informed

staff have specific knowledge of the nurture principles and their application at both universal and targeted levels and/or have received professional learning that has developed their knowledge and skills in understanding ACEs/trauma informed practice

Awareness of relationship based approaches

e.g. attachment, restorative approaches and/or solution oriented approaches

Appendix 3: Reflective Questions



The following reflective questions can help to guide your interactions:

Have I agreed next steps with the child/young person?

Do I need further support or information?

Do I need to share this information with anyone else?

Who do I want to be in this situation?

Am I offering myself and others unconditional positive regard?

Have I related
to the
chid/young
person and
helped to
regulate
him/her?

Am I really listening and responding to the child/young person?

alert and ready to support this child/young person?

Do I need assistance or help to deal with this

Are we in a safe place to deal with this situation?

Will this build or break trust? Is this interaction a positive intervention?

Appendix 4: Providing Reassurance and Comfort whilst Physically Distancing

Adapted from the Video by Julie Harmieson Co director of Trauma Informed Schools https://www.traumainformedschools.co.uk/resources

What you can do:

- Breathe deeply, loudly, slowly in an exaggerated way to amplify safety.
- Mirroring: Show the child/young person with your body language, facial expressions and gestures that you are empathising with them and comforting them. For example, wrap your arms round yourself and ask them to imagine that they are getting a hug from you.
- Use your voice to wrap empathy around the child/young person by using a soothing melodic storytelling voice, almost like a musical instrument.

What you can say:

- 'It's so good to see your face, to hear your voice.'
- 'I can see you are... upset/missing mum /finding this difficult.'
- 'I would like to give you a hug, so hold this blanket/toy/glove and see how secure and safe this makes you feel.'

Make, find or use a visual or physical stimulus

- Ask the child/young person to hug a teddy or soft toy.
- Ask the child/young person to wrap themselves in a blanket.
- Fill a glove with rice / ceramic beads and place it on the child/young person's shoulder.
- Draw round the child/young person or yourself. Colour it in and write messages on it. Deliver it to the person you would like to receive your hug.
- Give the child/young person a visual/picture/notes/post-it to show you are comforting them.





Appendix 5: Trauma Informed Actions & Nurture Principle Links

NP1	Learning is understood developmentally	NP2	The Environment offers a safe base
NP3	Nurture is important for Wellbeing	NP4	Language is a vital means of communication
NP5	All behaviour is communication	NP6 Transitions are important in children and	
			young people's lives

The table below contains examples of Trauma Informed Actions that will help to reconnect, rebuild, repair and resist traumatisation. The ideas have been adapted from varied sources and emphasise the importance of relationships, building core skills and reducing stress. Links to Nurture Principles are listed. Please refer to the corresponding nurture principle for more details (see the extended RNRA resource 'Nurturing Wellbeing to Build Back Better: A Trauma Informed Resource', REPS 2020).

Relate, Regulate, Rebuild and Repair	Nurture Principle Links		
Provide physical and emotional safety	NP 1		
Create a welcoming environment that is physically and emotionally safe.	NP 2		
Smile and show relaxed open body language and facial expressions.			
Amplify messages of safety and give lots of reassurance.			
Provide clear, accurate information about the COVID-19 situation.			
Listen to children and young people's fears and worries. Address them as clearly and honestly as possible at a developmentally appropriate level.			
Be Responsive and Supportive	NP 2		
Be calm and manage your own reactions by slowing down breathing and talk less.	NP 4		
Give practical and emotional support.	NP 5		
Give comfort and reassurance.	NP 6		
Jse the key adult approach to provide a predictable and consistent relationship.			
Show children and young people that you notice them and keep them in mind.			
Be Trustworthy	NP 2		
Allow children and young people time to gently build up trust with you.	NP 4		
Be patient and go at the child or young person's pace.			
Trust is earned in the smallest of moments. It is earned not through heroic deeds, or even			
nighly visible actions, but through paying attention, listening, and gestures of genuine care			
and connection.' (Brene Brown, 2020)			
Be Dependable	NP 2		
Persevere in providing a safe, accepting relationship.	NP 3		
Keep showing up, smiling and interacting with warmth and unconditional positive regard.	NP 4		
Don't make promises that you can't keep.			
Be predictable	NP 6		
ry to respond and behave in a consistent manner.			
Create predictable routines.			
Provide clear accurate information about any changes to routines and staffing.			
Observe behaviour with open minded curiosity	NP 5		
Try to work out if there are any triggers contributing to this behaviour or if the child or young			
person is communicating a hidden unmet need through this behaviour.			
Be understanding and compassionate	NP 5		
Reframe the behaviour by seeing it as children and young people's way of keeping themselves			
safe and trying to cope.			





Relate, Regulate, Rebuild and Repair	Nurture Principle links
Regulate and co- regulate	NP 3
Model the calm behaviour you want other people and children and young people to mirror.	NP 4
Create frequent opportunities for regulation, such as breathing, grounding exercises, and	NP 5
movement.	
Collaborate with the child or young person to select and plan regulation activities.	
Practice these regularly when the child or young person is calm so that s/he becomes familiar	
with these and can use them during times of stress.	
Teach children and young people and adults about their stress responses	NP 3
Help children, young people and adults to notice how their body feels when they are anxious	NP 5
and what kind of activities help them to feel calmer.	
Reduce children and young people's burden. Remind them that they are not to blame or	NP 3
responsible for what has happened and that it is okay to ask for help.	NP 4
The state of the s	NP 5
Amplify Joy	NP 1
Notice and join in with activities or objects the child or young person shows pleasure in.	NP 3
Use humour and fun where appropriate. Avoid sarcasm.	NP 4
Resist re- traumatisation	NP 5
Be aware of trauma triggers and limit exposure to them.	5
Rebuild	NP 3
Support children and young people to use their unique strengths, abilities and talents and to	•
reconnect with their sense of identity.	
Use 'I am' 'I have' 'I can' statements as sentence starters.	
Strengthen core skills	NP 1
Coach children and young people to help them identify, plan and meet their goals.	NP 3
Recognise effort, good choices and achievements.	NP 3
Give specific praise and feedback particularly in relation to effort, rather than vague, general	NP 4
praise.	
Maintain Boundaries and roles	NP 1
Do not allow children and young people to have too much responsibility.	NP 5
Set boundaries and limitations.	NP 6
Talk about returning to school routines and expectations for behaviour post COVID-19.	
Reflect and Repair	NP 4
If you do 'get it wrong' by saying or doing the 'wrong thing,' go back and repair the situation	NP 5
rather than letting it fester. Apologise and explain you were trying to help.	
Emulate hope	NP 3
Share stories of hope, helping and kindness that have come out of the COVID-19 crisis.	
Teach about historical events, giving examples of how communities recovered and rebuilt	
following times of crisis.	
Re-evaluate your values	NP 3
Prioritize relationships, regulation, repair and wellbeing.	
Remember self-care and self-compassion	NP 3
Look after your own wellbeing. Rest, relax, recuperate.	NP 5
Monitor your own emotional reactions.	
Seek help when you need it.	
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Appendix 6: Calming Activities Information Sheet

Below are examples of some strategies that can be used for calming anxiety and self-regulation. If you are encouraging children and young people to try these strategies, give them choices and a say in what, when, where and how they are going to try the strategies.



Brain Stem Calmers: An approach developed by Bruce Perry (Neuroscientist) to regulate the nervous system. These activities have a relaxing effect on the part of the brain involved in the stress response. When talking with words isn't working, we can try this approach to 'talk' directly to the brain and encourage it to feel safe enough to

move out of fight, flight, freeze, submit mode, into relax, rest and digest mode. These calmers are best done with a trusted adult in short, frequent, regular doses.

The examples of 'brainstem calmer' activities below are all patterned, repetitive and rhythmic. They are carried out in the context of a positive relationship in collaboration with the child or young person. https://attachmentdisorderhealing.com/developmental-trauma-3/

walking	marching	dancing	running	skipping
drumming	tapping	listening to rhythmic music	chanting	singing
skipping	bouncing a ball	swimming	rocking	linear swinging
			therapeutic massage	yoga



Safe Hands Thinking Minds (Dr Karen Treisman)

Free videos to support relaxation and emotional regulation can be found here:

http://www.safehandsthinkingminds.co.uk/covid-anxiety-stress-resources-links/

Some particularly useful videos from this website are linked below:

- Hand or star breathing: https://youtu.be/NAldSdx-jps
- Sensory, grounding, soothing and regulating box: how to make and create a sensory, soothing, and grounding box which supports all of one's senses to regulate. https://youtu.be/9XyxqWiqLkO
- Muscle tensing and releasing tool- tension releasing exercise of tensing and relaxing one's muscles. https://youtu.be/FbhUxg9eHDE





- **Left and right body breathing:** a breathing exercise which supports left and right breathing. https://youtu.be/MHwiqovPrXY
- Soaking in a positive moment: how we can find a happy, feel good and positive memory and travel back to it, anchor on to it and soak it in, including using all of our senses. https://youtu.be/RRiQixmqcXI

Grounding Resource (Louise Bomber)

Louise Bomber's 'Sofa Times' YouTube series is summarised here, with a number of useful, practical suggestions:

https://blogs.glowscotland.org.uk/re/public/renfrewshireedpsych/uploads/sites/2916/2020/05/14134533/Louise-Bombers-Youtube-Sofa-Time-Summary.pdf



