

# Emerging Minds.

## An introduction to trauma and adversity

### Facilitator's Handbook: Workshop 1

**National  
Workforce  
Centre for Child  
Mental Health**



# Introduction

## Note to facilitators

It is recommended that you **prepare before leading** this workshop by:

1. Reading through these facilitator notes and reviewing the accompanying slides
2. Highlighting the most relevant reflection questions for your audience
3. Identifying and photocopying any relevant additional resources to provide to each participant.

## Introduction to the workshop

Professionals and volunteers working with children and families have a unique role to play in promoting resilience, wellbeing and recovery in children (0-12 years) who have experienced adversity or traumatic events.

This workshop is designed to:

1. Support participants' understanding and awareness of:
  - what is meant by trauma and adversity
  - how children perceive and respond to traumatic events
  - the impact of adversity and trauma on parenting and the family environment
  - how a trauma-informed approach can help to support children and families who have experienced such events.
2. Support participants to:
  - reflect on their experiences of working with children who have experienced trauma or adversity
  - consider how they might alter their approach based on knowledge of how children might be affected by trauma and adversity.

## Audience

This workshop is designed for professionals and volunteers working with children and/or their families.

It can be completed individually or with a group of workers.

## Time

*Workshop 1: An introduction to trauma and adversity* is a foundational requirement and will take approximately 45-60 minutes to complete.

Please note: Workshops 2, 3 and 4 are additional optional workshops that focus on specific age groups and will each take approximately 15 minutes to complete. It is required that **ALL** participants complete **Workshop 1** before choosing **Workshop 2, 3** and/or **4** depending on the age group they work most closely with.

## Participant resources

- slide presentation
- facilitator notes
- printable resources
- additional resources.

## Note to facilitator:

The following facilitator notes are provided as a guide. We encourage you to tailor the presentation to suit the needs of your group. Various reflection activities are included throughout the workshop; we suggest you consider these in the context of your group and use only those that are applicable.

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# The Presentation

## Workshop 1 (required) – An introduction to trauma and adversity

### Slide 1

Welcome to this workshop series from the Emerging Minds: National Workforce Centre for Child Mental Health.

#### Facilitator's notes:

Commence by introducing topic and self, then before anything else, do the 'acknowledgement of country' (slide 2).

### Slide 2

#### Acknowledgement of country

#### Facilitator's notes:

Amend the wording to acknowledge the Country you are meeting on – i.e. Kurna Country. It shows a commitment to respectful practice in the acknowledgement of the many diverse Nations and a respect for cultural protocols.

For more examples/further information, see Reconciliation Australia's resource: <https://www.reconciliation.org.au/wp-content/uploads/2017/11/Welcome-to-and-Acknowledgement-of-Country.pdf>

I would like to acknowledge that we are meeting today on the traditional Lands of the [*Aboriginal nation*] people and pay my respects to the Elders past, present and emerging. I would also like to acknowledge the deep connection the [*Aboriginal nation*] people have with the land and the waters of this country and extend that respect to other Aboriginal and Torres Strait Islander people who are here today.

### Slide 3

#### Workshop 1 (required)

*An introduction to trauma and adversity*

The content for this workshop has been drawn from the Emerging Minds Community Trauma Toolkit. Additional resources will be provided at the end of this workshop, but the toolkit can also be accessed for free via the Emerging Minds website at [www.emergingminds.com.au](http://www.emergingminds.com.au).

#### Audience

This workshop is designed for professionals and volunteers working with children and/or their families.

It can be completed individually or with a group of workers.

#### Time

*An introduction to trauma and adversity* is a foundational requirement and will take approximately 45–60 minutes to complete.

Topics we will cover include:

- What is trauma and adversity?
- How do children perceive traumatic events?

- Myths around children and trauma events.
- Common reactions following traumatic events.
- How do children's reactions change over time?
- Parenting and environment post-trauma.
- Being trauma-sensitive.
- Reflection on practice.
- What next?

A handout containing additional resources will be provided at the end of the workshop.

## Slides 4 and 5

### Learning outcomes

This workshop aims to provide participants with a foundational understanding of trauma and adversity; the impact they can have on children; and the ways in which a trauma-informed approach can support recovery. It is not designed to explore specific therapies.

### Learning outcomes

1. Support participants' understanding and awareness of:
  - what is meant by trauma and adversity
  - how children perceive and respond to traumatic events across various ages and stages (0-24 months, 2-4 years and 5-12 years)
  - the impact of adversity and trauma on parenting and the family environment
  - how a trauma-informed approach can help to support children and families who have experienced such events
  - the importance of self-care.
2. Support participants to:
  - reflect on their experiences of working with children who have experienced trauma or adversity
  - consider how they might alter their

approach based on knowledge of how children might be affected by trauma and adversity.

## Slide 6

### Being mindful

#### Facilitator's notes:

You are welcome to set the pace in completing the workshop. Be aware of your own emotions, as well as the emotional and sensory responses of participants, and take a break if needed.

It is important to recognise that we all bring our experiences of adversity and of feeling overwhelmed into the workshop today. Speaking about traumatic events may be triggering for some, and it is important to be aware of how you are feeling as you go through the workshop. Remember to practice self-care and to seek help if needed.

During this workshop:

- Be aware of your emotional and sensory responses and take a break if needed. The following services also offer support.

If you find you are struggling, please talk with your supervisor, seek help, or call [Lifeline](tel:131114) on 13 11 14 or 1800RESPECT, or visit the [1800RESPECT website](http://1800RESPECT.org.au).

## Slide 7

### What is trauma and adversity?

#### Facilitator's notes:

This video gives a general description of trauma and adversity and is a useful starting point for this workshop.

**Suggested reflection activity** (can be done in groups or individually)

- What has this video added to your understandings of trauma and adversity?
- What stood out for you from the video?
- What can you take from the video and apply to your practice or experience?

The following video provides definitions of trauma and adversity and introduces the concept of complex and intergenerational trauma.

Video: *What is trauma and adversity?*

## Slide 8

### Definitions

#### Traumatic event

A traumatic event is a deeply distressing or disturbing experience. If these experiences are overwhelming for the child (too frightening or too painful), they can lead to a traumatic response.

A traumatic event is likely to involve either loss of life or a threat to life; loss of liberty or a threat to liberty; abuse, including emotional, physical or sexual abuse or neglect; and physical harm or a threat of harm.

It can be something the child experiences directly, such as being physically abused, or something they have witnessed, such as living in a home with family violence.

## Slide 9

### Adversity

Adversity can be an event or experience that is distressing and worrying; a misfortune; or a significant change or loss, such as the death of a loved one.

Adversities come from the types of challenges that occur in life from time to time. They may occur within our homes, or they may be caused by outside events, such as a financial crisis, natural disaster, loss of employment, or relationship breakdown.

Everyone experiences adversity at some stage in their life. Most of the time it does not cause lasting difficulties; however, ongoing adverse events, or a number of adversities over a number of years can have a cumulative effect. While they may not be considered traumatic in themselves, when put together, these adversities can have a negative impact on the developing child, and may lead to a trauma response.

## Slide 10

### What is a traumatic or adverse experience?

#### Group discussion

Within your group share your thoughts about the following:

- What comes to mind when you think about traumatic or adverse experiences?
- What experiences do you think may be traumatic for children?

## Facilitator's notes:

The key message is to understand the wide range of trauma reactions in childhood, including how children might perceive a traumatic event and how children's reactions to a traumatic event might change over time.

As participants are discussing, look at the list below to affirm responses and add any further information that is missed.

### What is a traumatic event?

A traumatic event is defined as any situation that the child subjectively experiences as overwhelming (too frightening or painful). These events can be something experienced only by the individual (e.g. being in an accident, witnessing a terrible event) or can involve groups of people (e.g. floods, storms, bushfires).

Up to one in four children will experience a traumatic event during childhood. Unfortunately, some children experience multiple traumas, which can have a cumulative effect and may make those children more vulnerable to stress reactions.

Some of the things that might be traumatic for children include:

- accidental injury that results in a visit to the hospital.
- serious illness.
- sexual or physical assault.
- serious injury or sudden death of a parent or close family member, especially if witnessed first-hand.
- man-made disasters such as terrorist attacks or incidents of mass violence.
- natural disasters such as earthquakes, bushfires, floods and cyclones.

Natural disasters can be particularly traumatic for many children as they typically impact upon entire communities, involve significant damage and destruction, and often result in loss of property and/or life. Further, the effects of such natural disasters are often long-term, creating adverse financial, social and emotional living circumstances for many families for extended periods of time.

## Slide 11

### Common statements that refer to trauma and its impact on children

Now that we've looked at experiences that may be traumatic for children, we're going to spend a little time considering some of the common statements about trauma and adversity and their impact on children.

## Facilitator's notes:

### Group discussion

After you present the following statement, provide an opportunity for participants to share their responses. You can then check in with the information below.

### Statement 1

All children who experience adversity will be traumatised and should receive counselling.

- **False**
- The good news is that with the right support from their family and community, most children will recover from traumatic experiences. However, a small percentage may need more ongoing specialised support from a GP or health professional.
- When supporting children and families who have experienced trauma and adversity, it is important to remember that these experiences often impact the whole family and can place extra stress on the caring relationships within the family.

## Slide 12

### Facilitator's notes:

#### Group discussion

After you present the following statement, provide an opportunity for participants to share their responses. You can then check in with the information below.

### Statement 2

Children and infants are too young to remember the traumatic incident/s and are therefore not affected by them.

- **False**
- Children's physical and mental health can be impacted by adverse events, no matter their age.
- We know that the younger the child, and the longer the duration of the adversity, the greater the risk to the child's physical and emotional wellbeing.

## Slide 13

### Facilitator's notes:

#### Group discussion

After you present the following statement, provide an opportunity for participants to share their responses. You can then check in with the information below.

### Statement 3

Once the event is over and things return to normal, kids 'bounce back' quickly.

- **True and false**
- Children are resilient, and the majority will recover from experiences of trauma. However, it is important to keep in mind that each child will respond differently to trauma. The time it takes to recover and the support that they may need may differ from one child to another, even within the same family.
- If you are concerned about a child's recovery, you may want to recommend the family get in contact with their GP.

## Slide 14

### Facilitator's notes:

#### Group discussion

After you present the following statement, provide an opportunity for participants to share their responses. You can then check in with the information below.

### Statement 4

It is the event itself that has the greatest impact on children.

- **False**
- It may not be the event itself that has the greatest impact on the child, but rather the impact of the event on the child's support systems. Traumatic experiences can place added stress on the family and the community, reducing their capacity to respond to the needs of the child.
- For this reason, it is important that parents receive support themselves, so that they are able to provide support to their children.

## Slide 15

### Facilitator's notes:

#### Group discussion

After you present the following statement, provide an opportunity for participants to share their responses. You can then check in with the information below.

#### Statement 5

Children are passive victims of circumstances and should not be involved in discussions about adverse experiences or trauma.

- **False**
- Children should be involved in discussions about planning or responding to adverse events.
- When children are involved, they have a chance to ask questions, to contribute and to express any concerns regarding the event. This involvement can give children a sense that the family has a plan to keep them safe.

### Facilitator's notes:

#### Further discussion

As you facilitate the discussion, you may want to share some research into children's experiences of family and domestic violence.

A recent study across four European countries looked at children's experiences of FDV and concluded that while they were often profoundly impacted by violent and coercive behaviours, children were not passive

observers of FDV<sup>1</sup>. However, organisations and adults working with children failed to recognise the agency and active role that children take in managing their lives and those of their siblings, and sometimes even those of their parents.

#### Reflection:

What are some of the ways that professionals might support parents to involve children in discussing or making plans for responding to trauma?

**The following strategies can be used by parents and professionals when involving children in discussing or responding to traumatic events or adversity.**

- It is OK for children to know that traumatic events or adverse experiences can happen, but it is important to also make it clear that you as an adult/carer/parent in the child's life will do all you can to protect and support them.
- When talking with children, create an open and supportive environment where they know it's OK to ask questions (but don't force children to talk if they don't want to).
- Speak to children calmly and with confidence and use words and ideas that they can understand. Be reassuring but don't make unrealistic promises or over-catastrophise.
- Acknowledge the child's thoughts, feelings and reactions. Let them know that you think their questions and concerns are important and appropriate.
- Accept that children may want to go over ideas more than once. Asking the same question over and over can also be a child's way of asking for reassurance.

<sup>1</sup> Callaghan, J., Alexander, J. (2015) Understanding, agency and resistance strategies (UNARS): Children's experiences of domestic violence. The University of Northampton



## Slide 16

### Facilitator's notes:

#### Suggested discussion

After you present the following statement, provide an opportunity for participants to share their responses. You can then check in with the information below.

### Statement 6

It is easy to pick out children and young people who have been affected by adversity or traumatic events.

- **False**
- All people, including children, respond differently to experiences of adversity and trauma.
- It is important to be mindful that some children may show their distress by 'acting-out', while others may be more withdrawn and keep their feelings hidden.
- Even several months or years after the event, a trauma response can still be triggered and impact the child.

## Slide 17

### Facilitator's notes:

**Suggested reflection activity** (can be done as a group or individually)

- What stood out or surprised you about any of these statements?
- What are other common statements you have heard or are aware of regarding children's experiences of trauma and adversity?

## Slide 18

### How do children perceive traumatic events?

So far, we have looked at the definitions of a traumatic event and adversity and some of the common statements that surround these experiences in relation to children. In the following slides, we're going to look at how children can perceive, respond and react to trauma and adversity.

Research has shown that perceptions of threat during a traumatic event may be very different for children and adults:

- Some children may perceive threat or danger (e.g. potential separation or injury) even if they are not directly impacted by the traumatic event.
- For example, **in the context of natural disasters**, parents may feel that their life or the life of their child is threatened (see column 1). The child, however, may be much more concerned about being separated from their parents and family during or immediately after the event (see column 2).
- This fear of separation may continue for weeks or months following the trauma depending on the age of the child and the severity of the threat.
- Similarly, losses that may be less important to adults (e.g. the loss of a favourite thing) may be of profound significance for the child (e.g. the loss of a comfort toy or blanket).

### Key Message 1: Children and adults perceive threat differently.

Even if adults do not feel threatened, or perceive a particular type of threat, it is possible that the child has perceived a very different kind of threat that has in turn become distressing for them.

**Key Message 2: The perception of threat** (e.g. fear of being separated from parents) **may continue for weeks or months following the trauma**, depending on the child's age, severity of the threat, etc.

**Key Message 3:** For some children, **witnessing the trauma** will have as much of an impact as being directly involved in the event. This is particularly true when children are living in a home with family and domestic violence.

## Slide 19

### Types of reactions

#### Facilitator's notes:

This table provides 'general' types of reactions.

#### Group discussion

Briefly discuss the table contents. Let participants guide how long you spend here.

### Every child reacts differently to trauma

- The majority of children are resilient. In many cases, when a child receives the right support and care from their family and community, they may only experience minimal or short-lived distress. Some even report feeling more confident or notice more positive changes following trauma.
- Some children may express a lot of different reactions, or one intense reaction immediately following the event, but gradually return to their previous functioning over time.
- Some children experience immediate traumatic stress reactions which persist over time. Sometimes these reactions may intensify or develop into different emotional and behavioural problems.
- Some children appear resilient at first but display trauma reactions later on.
- A common (but incorrect) belief is that

very young children are not affected by trauma and do not notice or remember traumatic events. Anything that affects older children and adults can also affect very young children.

- Babies and young children manage their feelings through their relationships with parents and other adult carers, depending on them to feel safe and secure and to buffer their stress. This means they can be very sensitive to the emotional states of their carers; and can quickly become unsettled and feel unsafe in situations where their carers are distressed.
- It is important to recognise that exposure to a traumatic event, such as a natural disaster, can impact upon the physical, behavioural, emotional and mental development of children of all ages, including babies and toddlers.

**NOTE:** For further information about the impact of trauma and adversity on a child's capacity to thrive, see the e-learning course [The Impact of Trauma on the Child](#) on the Emerging Minds website.

## Slide 20

### Understanding reactions and recovery over time

It is difficult to define or predict how a child may react and what recovery will look like for each child.

Just as each child will respond differently to trauma and adversity, the timeline for recovery is also specific to each individual.

It is worth keeping in mind that children go through a process of adjustment as they adapt to the event and so their reactions are contextual (influenced by what is happening around them) and dynamic (continuously changing over time).

For example:

- A child's trauma response maybe reactivated when they enter transition periods such as moving from primary to high school or starting puberty.
- For those children who are living with ongoing adversity and trauma (e.g. living in a family where there is violence), reactions and recovery may not follow a clear and linear path.

In most cases, children will receive the right support and care from their family and community, enabling them to recover. However, it is important to recognise that these experiences can often impact the whole family, and the caring relationships needed within the family can also be affected.

#### **In the context of natural disasters:**

In the **immediate aftermath** of the event, the family may be surrounded by support and/or busy managing direct consequences of the event (e.g. restoring properties). In this phase, the family is often so busy during that their emotional reactions are contained.

As the family begins to return to routine, support may begin to diminish as people return to their own lives. In this **intermediate** phase, families have time to stop and think. It is then that people begin to display and to notice more ongoing behavioural and emotional responses.

In the **longer term**, some children will experience ongoing difficulties anywhere up to two years later. Symptoms may only appear (or reappear) 6-12 months after the disaster, as the economic and familial costs of the disaster begin to unfold. Many of these events are 'secondary stresses', which are secondary consequences after a disaster (e.g. economic stress, mental health issues or distress, housing difficulties).

**Key Message:** Reactions can persist or worsen over time. Children will not necessarily be fine in a few months' time.

## Slide 21

### Types of reactions over time

#### **Facilitator's notes:**

Use this slide to demonstrate that trauma reactions are often dynamic and can present differently at any point in time.

Focus first on children's resilience (e.g. 'Although most children will recover over time, there are some who will experience significant ongoing difficulties').

If trauma symptoms or emotional and behavioural difficulties are left untreated, symptoms can follow a chronic and unremitting course. They can have a significant adverse impact on children's social, emotional, behavioural and physical development (may be present 1-2 years later).

For some children, difficulties can become so interfering that they are considered to cause 'clinical' (severe) levels of distress.

For other children, the experience of the traumatic event may cause them to react differently to events over the following year. Some everyday events (e.g. homework, exams, arguments with friends) may trigger emotional or behavioural reactions (e.g. anxiety, depressed mood, fighting) that the child would not normally demonstrate.

## Facilitator's notes:

### Additional resources:

- Fact sheet – [Childhood trauma reactions: How and when to get help](#)

Refer to the table of additional resources at the conclusion of this handbook for info on each resource.

## Slide 22

### The impact of traumatic events on parenting and the family environment

- A post-trauma or post-disaster environment may mean some parents and other caregivers are unable to provide basic needs, such as food and shelter.
- A post-trauma environment may also be disorganised and unpredictable due to moving house, changing schools, lack of familiarity with surroundings at home/school, or living in conditions that require sharing and are possibly overcrowded.
- Parents are also at increased risk of experiencing adverse psychological outcomes and may develop ineffective parenting behaviours following a traumatic event. Parents experiencing anxiety may become more restrictive or overprotective in their parenting (e.g. not allowing the child out of their sight) or may accidentally model their fear responses and poor coping responses to their child.
- Parents suffering from depression may become more emotionally withdrawn, unresponsive and/or unavailable and therefore may not be as able to help their child to process and cope with distressing trauma symptoms and experiences.
- These changes in parenting style and environment may have a negative impact

on the parent-child relationship; further exacerbate behavioural and emotional difficulties; or contribute to a child's belief that the world is a dangerous and unsafe place.

- It is therefore important to be aware of how parents are coping with the trauma event and whether they would benefit from additional support.

## Facilitator's notes:

### Additional resources:

- Video – [Re-establishing routines and rules following a disaster or traumatic event](#)
- Video – [The impact on parenting and the parent-child relationship after a disaster or traumatic event](#)
- Podcast – [The ongoing psychosocial needs of children following a community trauma](#)

Refer to the table of additional resources at the conclusion of this handbook for info on each resource.

## Slide 23

### Let's recap

Children's responses to trauma:

- **are different for every infant and child.** There is no way of predicting exactly how any individual child will react to a traumatic event.
- **can change over time.** Trauma reactions are often dynamic and can present differently at any point in time.
- **will vary depending on the child's age, developmental stage, personality, pre-trauma functioning and previous life events.**

- **are often influenced by the parent-child relationship, family circumstances and environment.** How a child's parents and other adults, such as their educators and carers, react during and after a traumatic event can influence how the child responds to the event.
- Children can and often do express trauma reactions in very different ways to adults. Some of these reactions might be adaptive and positive, whereas others may cause the child (and those around them) some difficulty and may persist over time.
- For some children, just witnessing the trauma will have as much of an impact as being directly involved in the event.

### Facilitator's notes:

#### Additional resources:

- Fact sheet – [Common and severe stress reactions to a traumatic event](#)

Refer to the table of additional resources at the conclusion of this handbook for info on each resource.

## Slide 24

### Supporting children who have experienced traumatic events

Let's look now at ways we can support children who have experienced trauma and adversity (video).

- In this video, Nicola Palfrey, Director of the Australian Child & Adolescent Trauma, Loss and Grief Network, talks about the 'trauma lens'.
- When a child is presenting with difficult behaviours or distressing emotions, it is understandable that adults in the child's

life want to work out the cause.

- A 'trauma-informed approach' combines an open-minded curiosity about what might be behind the child's behaviours, with knowledge about the impact of trauma.
- This stance gives you a starting point to discover what might be behind the child's behaviour in that moment.
- An open-minded and curious approach is not about assuming that every child is affected by trauma; nor is it about digging around or prying into a child's history. It is about being open and informed about the impacts trauma can have on a child, so that you can provide space for a child or a parent to open up about what is going on for them.

## Slide 25

### Why adopt a trauma-informed approach?

- A trauma-informed approach is open-minded and curious. It helps you to adopt a stance of respect and empathy for the child and family, and a desire to understand. It is underpinned by knowledge of the prevalence of trauma and its impacts.

### Why is a trauma-informed approach important?

- We know that trauma and adversity is prevalent in the lives of Australian children. Many have, or will, experience adversities such as parental separation, parental substance use, bullying, homelessness, or family financial problems. Some will experience trauma through natural disasters, one-off incidents (such as accidents), abuse, neglect, or witnessing family violence.
- You can have an impact on the ability of children who've experienced trauma to make positive connections with

their peers and with the adults around them. You can provide them with a safe, supportive relationship that helps them to work through their emotions, to engage with their school or community, and to advance in their learning, development and relationships.

### A trauma-informed approach will:

- **allow children to receive support from adults who are curious and open-minded**

Support offered by curious and open-minded adults who have empathy, understanding, and compassion for the child's experiences will inevitably promote better outcomes for their mental health, wellbeing, and educational engagement.

- **assist in identifying children in need of support**

Being trauma-informed allows for the early identification of children at risk of the negative impacts of trauma. The children and their family can then be offered appropriate supports.

- **allow for efficient and effective early support**

Efficient and effective early support from family and community networks and health systems will provide appropriate assistance for children and families and may alleviate the need for more intensive support in the future.

- **build family resilience**

A trauma-informed approach helps children and families to develop the skills needed to manage future adverse and potentially traumatic experiences.

- **support children to thrive**

When children who have experienced trauma are supported through a trauma-informed approach, they and their families are stronger. This allows a child to engage in learning and build strong networks of friends; and gives them the opportunity to thrive.

## Facilitator's notes:

### **Please stress - More than one conversation**

*"A trauma-informed approach includes the understanding that it will likely take many small conversations to build rapport and make a connection with a child who is experiencing or has experienced trauma. Don't go into a conversation with the aim of 'fixing' things or 'rescuing' the child. Your role is to be present, listen with compassion, provide space for the child to connect to their emotions, and be a friendly adult in their lives. Often, this is enough."*

### **Reflection:**

- What does/could a trauma-sensitive approach look like in your place of work?
- What would a curious stance look like?

## Slide 26

### **Self-care is vital for any professional to support others, particularly children.**

Experiencing a traumatic event personally and/or being a professional in a community that has recently experienced a trauma can be overwhelming. It is important that you attend to your self-care and that of your family.

Some essential tools for this include linking into peer supports, engaging in stress reduction activities and seeking opportunities to reflect on your experiences with your professional colleagues.

## Facilitator's notes:

### Additional information

'Maintaining a healthy lifestyle' includes healthy eating and regular exercise, relaxation and sleeping. Professionals who maintain a healthy lifestyle are better able to manage their own stress reactions and to respond effectively to children's reactions and difficult behaviour.

## Slide 27

### Self-care plan

## Facilitator's notes:

### ACTIVITY: 'Creating a self-care plan'

**Duration:** 15 minutes

**Aim:** To encourage professional self-care by preparing for difficult situations.

**Resources:** [Completed self-care plan/](#)  
[Blank self-care plan](#)

### Instructions:

1. Discuss the completed self-care plan with participants. Ask them to consider the following:
  - Which section of the plan do you relate to more easily?
  - Which element are you more reticent to access?
  - What gets in the way of your accessing a comprehensive self-care plan?
2. Invite participants to complete their own plan.
3. Encourage the group to share if they wish.

Refer to the table of additional resources at the conclusion of this handbook for info on

## Slide 28

### Summary – Children and trauma

#### Key points

- **Self-care** is vital for any professional to support others, particularly children.
- Children are one of the most **vulnerable** groups during and after a traumatic event.
- **A stable routine and boundaries** help children to recover after trauma.
- Most children **recover well** after a traumatic event; however a small minority will experience long-term impacts, requiring additional support.
- Children can **play a role** in positive preparation and recovery efforts in both their families and communities.
- Children need adults to help them to **recognise and voice** their feelings.
- **Basic foundational knowledge** about trauma can be helpful for everybody.

## Slide 29

### Reflecting on your practice

Reflecting on the information covered in this workshop, consider one or two of the following questions as you think about how this might impact your practice.

- *What have you learnt from this workshop about your practice?*
- *What struck you or resonated with you?*
- *Reflecting on this information what practices might you continue individually or as a team, and what might you change?*
- *How will you know if the change is having an impact?*
- *How do you/could you integrate a trauma-informed approach into your work?*
- *How might you view the behaviours that you see in children through a trauma-informed lens?*
- *Think about what you currently do or say, and what you will now change after completing this workshop.*

## Slide 30

### What next?

#### Facilitator's notes:

This is the end of Workshop 1. You may want to break here, or choose from:

#### Workshop 2

##### ***Understanding and supporting children's responses to trauma and adversity: 0-24 months***

- Trauma responses in children aged 0-24 months.
- Supporting children aged 0-24 months who have experienced trauma.
- Reflection on practice.

#### Workshop 3

##### ***Understanding and supporting children's responses to trauma and adversity: 2-4 years***

- Trauma responses in children aged 2-4 years.
- Supporting children aged 2-4 years who have experienced trauma.
- Reflection on practice.

#### Workshop 4

##### ***Understanding and supporting children's responses to trauma and adversity: 5-12 years***

- Trauma responses in children aged 5-12 years.
- Supporting children aged 5-12 years who have experienced trauma.
- Reflection on practice.

### Additional resources

Refer to table of additional resources at the conclusion of this handbook for information on each resource.

- [The Impact of Trauma on the Child e-learning course](#)
- The [Community Trauma Toolkit](#)
- [The Ongoing psychosocial needs of children following a community trauma podcast](#)

## Slide 31

Thank you.



# Resources

	Type of resource	Name and link to resource
1	Fact sheet	<p><b><u>Common and severe stress reactions to a traumatic event</u></b></p> <p>Following a traumatic event, children may experience a variety of reactions, ranging from mild to severe. It is important for adults to watch for any severe reactions from children as this may indicate that additional help is required.</p> <p>Age: 0-12 years</p>
2	Fact sheet	<p><b><u>Childhood trauma reactions: How and when to get help</u></b></p> <p>This fact sheet outlines how educators can understand when children might require additional help following a traumatic event, as well as what they can do to arrange help for students.</p> <p>Age: 0-12 years</p>
3	Activity sheet	<p><b><u>Self-care Plan: Completed</u></b></p> <p>This planner can help you to identify your own personal signs of stress and plan strategies that may help you to manage your own stress and emotions.</p>
4	Activity sheet	<p><b><u>Self-care Plan: Blank</u></b></p> <p>This planner can help you to identify your own personal signs of stress and plan strategies that may help you to manage your own stress and emotions.</p>
5	Fact sheet	<p><b><u>Trauma responses in children aged 0-24 months</u></b></p> <p>This fact sheet highlights some of the common trauma reactions that may be seen in children aged 0-24 months, as well as outlining signs that may indicate further assistance is required.</p> <p>Age: 0-24 months</p>
6	Fact sheet	<p><b><u>Trauma responses in children aged 2-4 years</u></b></p> <p>This fact sheet highlights some of the common trauma reactions that may be seen in children aged 2-4 years, as well as outlining signs that may indicate further assistance is required.</p> <p>Age: 2-4 years</p>

7	Fact sheet	<p><b><u>Trauma responses in children aged 5-12 years</u></b></p> <p>This fact sheet highlights some of the common trauma reactions that may be seen in children aged 5-12 years, as well as outlining signs that may indicate further assistance is required.</p> <p>Age: 5-12 years</p>
<p><b>Additional resources</b></p> <p>The following additional resources offer guidance for professionals who are supporting children and families who have experienced adversity or trauma. The resources have been developed for various target audiences; however, the information has relevance across roles and professions.</p>		
8	Fact sheet	<p><b><u>The perinatal period: Trauma and families</u></b></p> <p>This tip sheet provides some information about trauma during the perinatal period. The perinatal period generally refers to a woman's pregnancy, delivery and the first 12 months after the baby is born.</p> <p>Age: 0-12 months</p>
9	Fact sheet	<p><b><u>How childcare professionals can help children aged 0-24 months</u></b></p> <p>This fact sheet outlines how professionals can help children aged 0-24 months following a traumatic event, as well as ways to identify when further assistance is required.</p> <p>Age: 0-24 months</p>
10	Fact sheet	<p><b><u>How educators can help in the classroom</u></b></p> <p>This fact sheet outlines how educators can help children in the classroom following a traumatic event, as well as ways to identify when further assistance is required.</p> <p>Age: 5-12 years</p>
11	Fact sheet	<p><b><u>Trauma sensitive behaviour management</u></b></p> <p>Exposure to stressful events and trauma can result in children being unable to control their emotions and behaviour. Being able to see that the child's behaviour is a consequence of their physiological and emotional responses to the event – rather than perceiving it as malicious – can make it easier to be patient and calm.</p> <p>Age: 5-12 years</p>
12	Fact sheet	<p><b><u>Helping children recover after trauma: Classroom activities</u></b></p> <p>Being familiar with the types of reactions that your students can have is the first step in helping them. Knowing how to work out if there is something more serious going on and how to help children and their families get the assistance they need is also particularly important.</p> <p>Age: 5-12 years</p>

13	Video	<p><b><u>Re-establishing routines and rules following a disaster or traumatic event</u></b></p> <p>This video, featuring child psychotherapist Ruth Wraith, outlines how important it is for families to re-establish school and home routines after a disaster. Children need stability and familiarity to help them recover.</p> <p>Age: 5-12 years</p>
14	Video	<p><b><u>Infant and perinatal wellbeing: Risk and resilience factors</u></b></p> <p>This video, featuring Dr. Andrea Baldwin from the Queensland Centre for Perinatal &amp; Infant Mental Health, outlines some of the things children need to get the best start in life. It also discusses some of the strengths and vulnerabilities that can affect children's responses to disaster.</p> <p>Age: 0-4 years</p>
15	Video	<p><b><u>The importance of story and play for young children following a natural disaster</u></b></p> <p>This video, featuring Andrea Murray from the Queensland Centre for Perinatal &amp; Infant Mental Health, discusses the importance of stories and play for children after a disaster, and how adults can support this.</p> <p>Age: 0-5 years</p>
16	Video	<p><b><u>The impact on parenting and the parent-child relationship after a disaster or traumatic event</u></b></p> <p>This resource contains suggestions and advice for professionals and parents to help support families in parenting their children after disaster. Child psychotherapist Ruth Wraith discusses how parent-child relationships are key to helping children feel safe and secure.</p> <p>Age: 0-12 years</p>
17	Video	<p><b><u>Queensland Centre for Perinatal and Infant Mental health: Natural disaster resources</u></b></p> <p>This video, featuring Andrea Murray, talks about the development of the Birdie's Tree storybooks by the Queensland Centre for Perinatal and Infant Mental Health team. The books cover flood, cyclone, fire and drought. The stories try to portray disasters from children's point-of-view and help them understand the event.</p> <p>Age: 0-12 years</p>
18	Podcast	<p><b><u>The power of play</u></b></p> <p>Discover the benefits of child-lead play for parent-child relationships and healthy child development.</p> <p>Age: 0-12 years</p>

19	Podcast	<p><b><u>The ongoing psychosocial needs of children following a community trauma</u></b></p> <p>Psychologist and child and adolescent trauma, loss and grief expert, Michelle Roberts, discusses the ongoing psychosocial needs of children following a disaster or community trauma and the ways in which schools and families can work together to help prioritise and support children's needs.</p> <p>Age: 0-12 years</p>
20	Webinar	<p><b><u>Supporting children's mental health after trauma</u></b></p> <p>The webinar featured a facilitated interdisciplinary panel discussion of a case study. The panel comprised of Dr Sara McLean (psychologist), Dr Jackie Amos (psychiatrist) and Phoebe (lived experience advocate). Dan Moss, Emerging Minds' Workforce Development Manager facilitated the discussion.</p> <p>Age: 0-12 years</p>
21	e-learning course	<p><b><u>The Impact of Trauma on the Child</u></b></p> <p>This course will introduce learners to key understandings about trauma and adversity, and their impact on children. It explores the ways that a child might respond to trauma, and how children and families can recover from trauma. It will also introduce a trauma sensitive approach to supporting children who have experienced trauma or adversity, and invite learners to reflect on how they can integrate this into their interactions with children.</p> <p>Age: 0-12 years</p>
22	Toolkit	<p><b><u>Community Trauma Toolkit</u></b></p> <p>This toolkit contains resources to help and support adults and children before, during, and after a disaster or traumatic event. It will help you to understand some of the impacts of disaster and how you can help to lessen these impacts.</p> <p>Age: 0-12 years</p>