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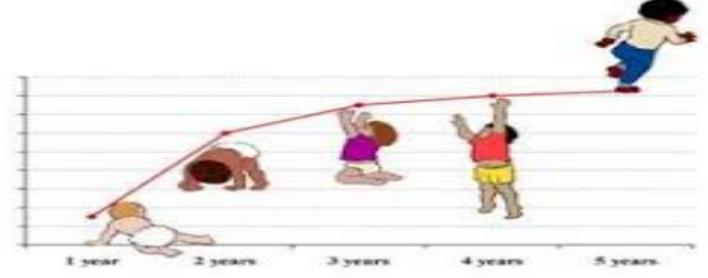


Early Trauma Impacts on a Child's Brain Development, Functioning and Behaviour





Brain Science



"Thinking about Thinking"
Higher Reasoning
Executive Function

Prefrontal Cortex

9 Functions of the Prefrontal Cortex

- 1. Empathy
- 2. Insight
- 3. Response Flexibility
- 4. Emotion Regulation
- 5. Body Regulation
- 6. Morality
- 7. Intuition
- 8. Attuned Communication
- 9. Fear Modulation

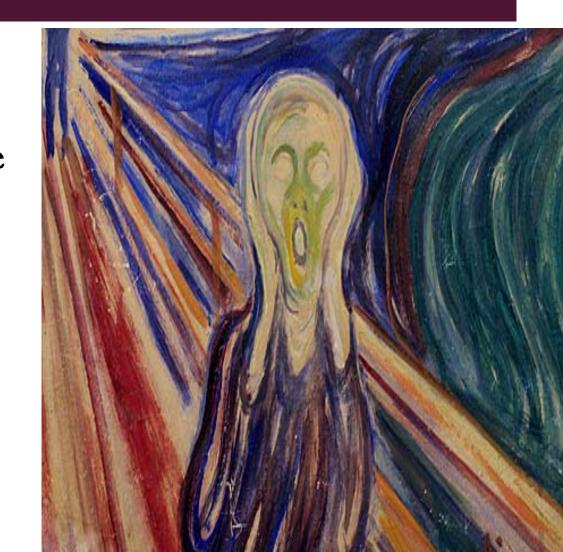


Limbic Brain

- 1. Fight, flight, freeze stress response
- 2. Thinks, "Am I safe? Do people want me?"
- 3. Emotions live here

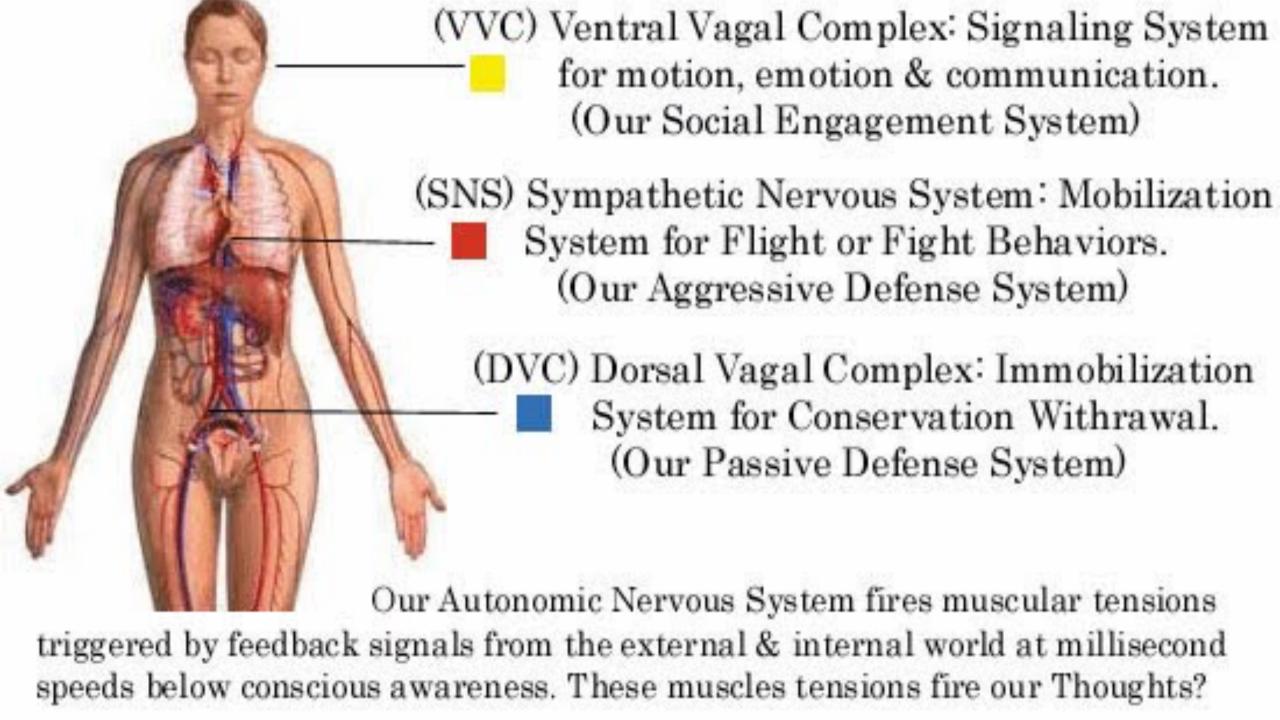
Developmental Trauma Disorder (Van Der Kolk, 2003)

Multiple or chronic exposure to one or more forms of developmentally adverse interpersonal trauma (eg. Neglect, abandonment, betrayal, physical assaults, sexual assaults, threats to bodily integrity, coercive practices, emotional abuse, witnessing violence and death.





Fear Shuts Down Curiosity and Exploration: Fearful and Anxious Children Cannot Learn as they are in Survival Mode



Polyvagal Theory-Porges 2011

- Neurophysiological and neuroanatomical foundations of emotions, attachment, communication and self-regulation
- Challenges two dimension model of fight flight & freeze
- When no environmental demands or challenges ANS in balance- open, flexible, non-defensive
- 3 distinct subsystems of ANS behaviorally linked to threat/danger:
- > mobilisation- negotiate threat escape possible
- social engagement-seek protection-slows heart rate, calms body and mind through safety cues
- Overwhelming thereat: Immobilisationshutdown/dissociation

Neuroception

Environment Behaviors Safe **Social Engagement Danger** Fight/Flight Life threat Shutdown Physiological State Copyright © 2012 Stephen W. Porg

Expectations Of Threat/Attack!

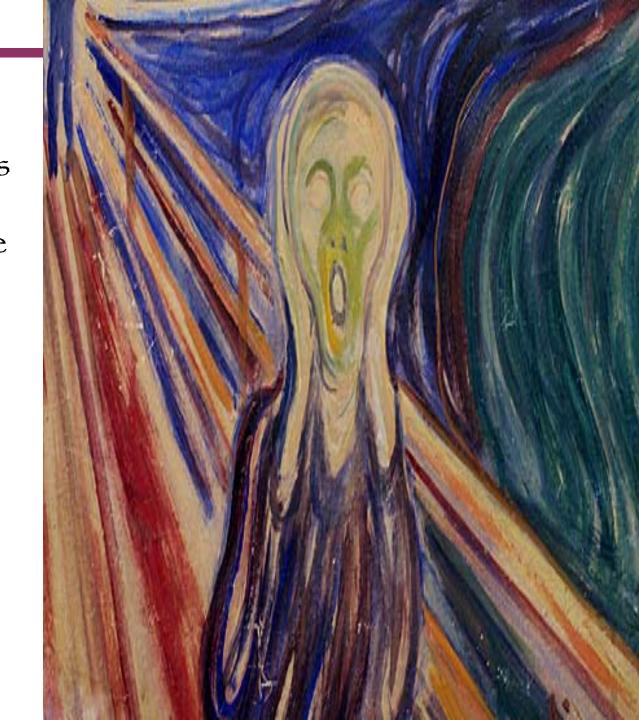
Neuroception and Interoception Influence Perception

"our state of mind can turn even neutral comments into fighting words, distorting what we hear to fit what we fear."

(Siegel, 2011)

- Children growing up in unsafe/ dangerous environments with no escape become disoganised and struggle to detect/judge threat accurately- perceive all people are threatening-lack of basic trust.

 Tendency for fight/flight or shut down in
- freeze.
- Read neutral faces as aggressive and
- fearful faces as angry
 Dissociate as experiencing "fear without resolution"
- Primitive defenses constantly mobilised-implicit memory from sensory cues Healthy care seeking shut down



Manifestations Of Trauma Impairments- Physiological, Cognitive and Psychological



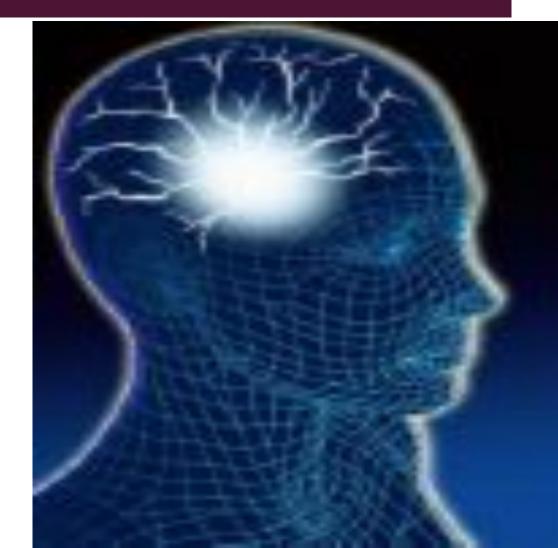
Interpersonal Trauma shapes and cements the internal working model and affect scripts into patterns of behaviour

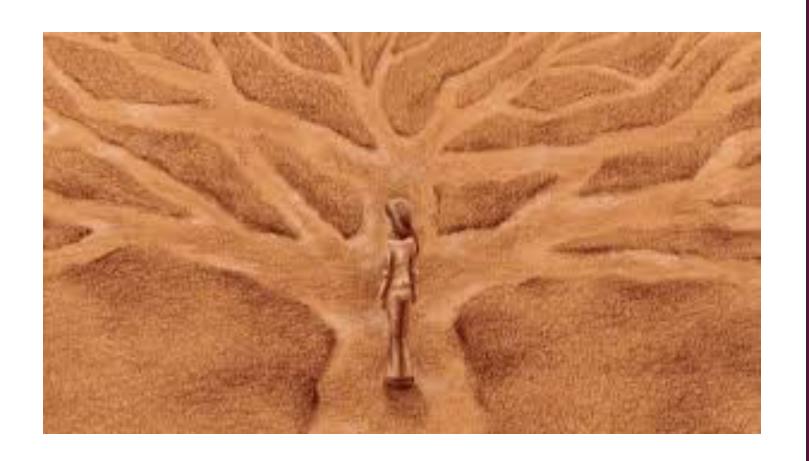
- It devastates basic trust, can fracture the mind and quash the spirit
- Flashbacks, nightmares, intrusions, triggers, seizures, absences (dissociation)
- Affect tolerance and regulation
- Somatic experiencing
- Cognitive/information processing
- Self-concept
- Relationships with self/other

Failures in Attunement and State Regulation

Impairments in:

- Self-regulation- calming down, warming up, stress management
- Processing of information-subject to distortions
- Social functioning ability to engage in relationships/social skills





Supporting Children Towards Recovery

People Need People



• Trauma as a brain injury rather than a pathology residing within a person.

Understanding how trauma impacts and how humans develop strategies to survive, compensate and self-protect- helps us to recognise how we can help

The importance of affect attunement for safety/sociostatic regulation & healthy development and functioning in humans through

The transformative power of an attuned therapeutic relationship
The healing power of empathy



What Does The Research Say?



- · Adults who take time to get to know and understand the child
- Adults who help the child to feel safe- physically and emotionally- linked to trust and predictability
 Adults who are able to understand and empathise with the
- child's subjective experience

 Adults who recognise behaviour as communication
- Adults who regulate themselves well
- Adults who repair disconnections
 Adults who are able to equip the child with the learning and skills to cope with challenge
- Adults who are able to recognise and reflect back the child's strengths (rather than focusing on failures or pathology). In organisations there needs to be a whoe organizational commitment to this and a broad philosophy of care towards staff as well as children.



Responding in Relationship

Responding to Behaviour



Thank you for Receiving my Presentation