# Creative Approaches to Engaging Children in Trauma Processing

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## Warming-Up

#### Trauma is...

- "Too much, too soon, and too fast." (Giarretto)
- "The ongoing effort of survivors to stand on guard not to remember." (Lahad)
- "The conflict between the will to deny horrible events & the will to proclaim them aloud is the central dialectic of psychological trauma." (Herman, 1992)



## Understanding Reactions to Trauma & Disaster

► There is <u>functionality</u> to these symptoms and usually a noted difference in people's response a few weeks after.

The majority of children exposed to a traumatic event will NOT need formal psychological intervention.

- ► What often mediates the reaction is early intervention & connection to familiar networks of care & support.
- Clinical work in the acute stages of trauma and disaster is NOT psychotherapy.

▶ Whether an event becomes traumatic has much to do with the meanings one ascribes to the event.

➤ Young people need adults to help give them a framework for what has happened.

► The advantage of a public trauma is that people have the chance to be part of a community—to sense that they are not alone.

### Recovery is About...

- Establishing Safety
  - Physical, Social, Psychological, Moral (Bloom, 1997)
- Remembrance & Mourning
- Re-Connection
  - to community, family & a sense of "going on being"

#### Tenets of Experiential Work



- Healing exists in relationships
- Change is an implicit, and explicit, process
- Experiencing over describing
- Here-and-now over recalling the past
- Spontaneity & creativity → health & growth
- Non-verbal communication

### Arts-Based Approaches

- Provide entry into the locked-down system
- Provide distance and containment
- Bridge the hemispheric split between memory & language and target implicit memory
- Engage with play
- Concretize memories
- Explore past or future
- Engage children kinesthetically
- Provide forms of interactive regulation

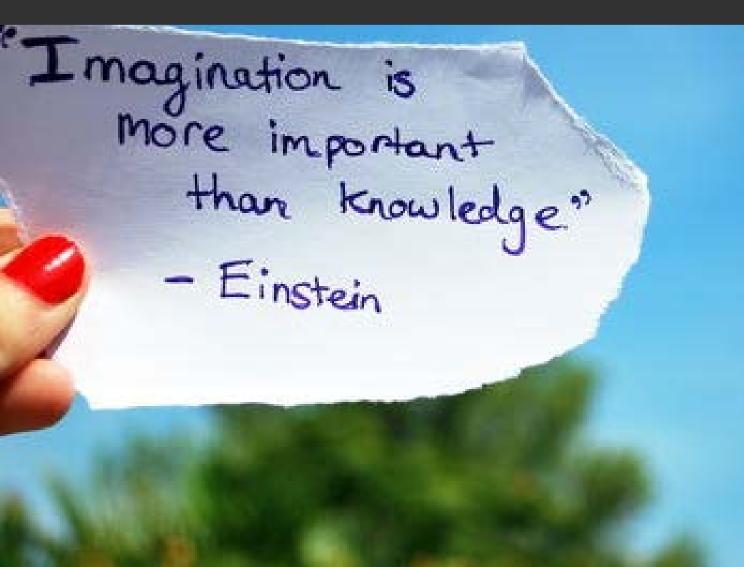


Externalize

Organize

Re-Integrate

### The Power of Imagination

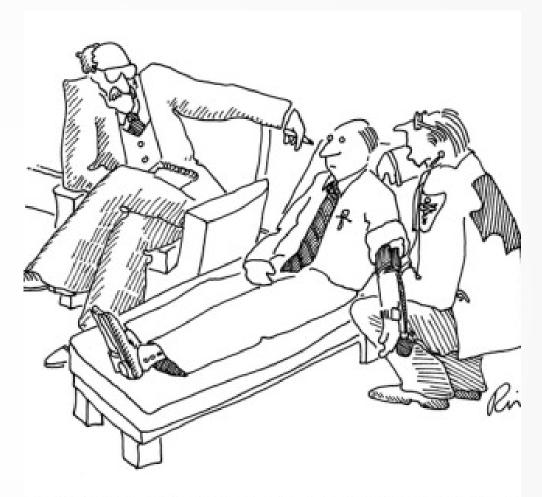


"Contemporary neuroscience, in dissolving the presumed boundaries between perception and motor activation, demonstrates that—as far as the brain is concerned—there is much less difference between lived and imagined experience than we have previously supposed. The implication here is that therapeutic change may be promoted through imagining new behavior as well as by actually behaving in ways that are new."

### COUNTERING RESISTANCE

Channeling resistant energy into treatmentcompliant behavior.

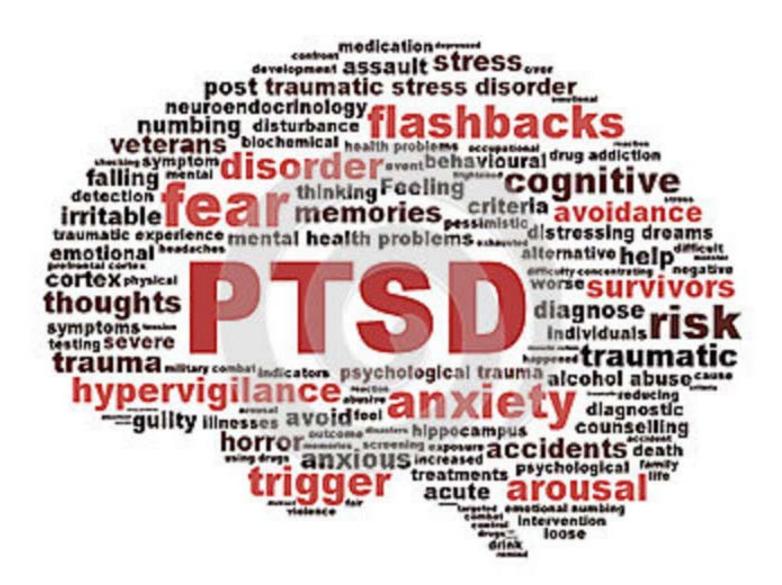
Moving rigid, stuck interpersonal positions into the realm of more playful engagement.



"His resistance to therapy could be due to death.

## Giving Voice to the Unspeakable

- Giving form to that which is formless
- Holding contradictions
- Fostering movement toward being an artist, and also being a witness to one's own creation



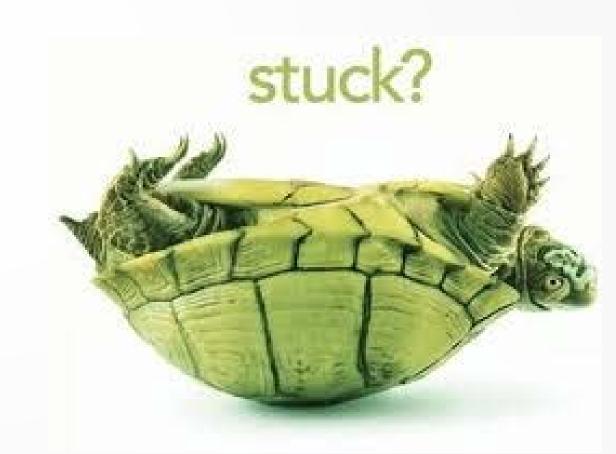


## Learning by Doing

### Where are they stuck?

## Identifying Points of Intervention

- What's the memory/feeling/ thought that the child keeps returning to/can't get out of their mind?
- The place where the defense crops up.



Re-experiencing aspects of the original trauma in the here-and-now & relative safety of the therapeutic relationship where the old memories & feelings can be paired with new, corrective experiences.

Trauma
Processing:
Providing the
Experience
that Things can
be Different

Three
Phases of
Treatment

Developing resources to regulate arousal & restore self-esteem and competency

Addressing Memories (Working-Through)

Exploring relationships and moving on from the past

### PTSD Symptom Clusters



**HYPERAROUSAL** 



SOCIAL FRAGMENTATION



**INTRUSION** 



**AVOIDANCE** 

Addressing Hyperarousal



### Treatment Goal

■ Soothe the brainstem (Perry)

Addressing Social Fragmentation



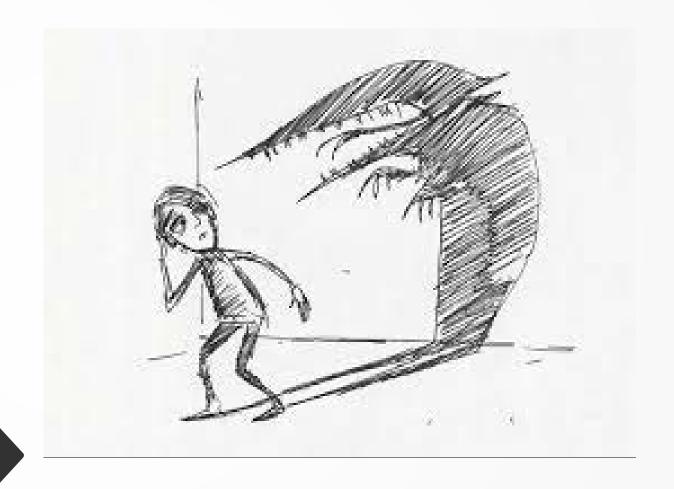
## Treatment Goals

- Undo Aloneness (Fosha)
- Create a relationship that can hold increasing layers of complexity, error, humanity, spontaneity, mutuality

My Life as a Book



## Addressing Intrusion



## Treatment Goals

- Internalize a sense of safety and selfefficacy
- Pairing of trauma memories with new experience & effective action

Greetins myself am writeing friend are amazera

Addressing Avoidance



## Treatment Goals

- **■** Expand the Window of Tolerance (Siegel)
- **■** Reduce Shame



### **RE-STORYING**

- Strengthening internal locus of control by assuming roles of power & competence.
- Speaking from more vulnerable parts of self that did not get voiced in real life.



"No ceremony attaches to the moment that a child sees his own worth reflected in the eyes of an encouraging adult. Though nothing apparent marks the occasion, inside that child a new view of self might take hold.

He is not just a person who is a burden to the sad adults in his life, not just a child who fails to solve his family's problems, who fails to rescue them from pain and madness or addiction or poverty or unhappiness. No, this child might be someone else, someone whose appearance before this one adult revealed specialness or lovability, or value."

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