What is Trauma?

Trauma may occur when a child/young person feels intensely threatened by an event in which he or she is involved or witnessed and is often followed by serious injury or harm.

Developmental trauma involves multiple incidents and occurs over a period of time bringing on an intense amount of stress to the mind and body of the child/young person. The harm usually occurs repeatedly over time by people who are supposed to care for them.

Why do I need to know about trauma

The impact of abuse and neglect continues for children even after they have entered foster care, therefore the child/young person in your care may have come to you with the ongoing affects of developmental trauma. Understanding developmental trauma will help to assist you in caring for the child/young person in your care.

Developmental trauma affects children/young people differently at different ages depending on their personality and early relationship experiences. Being removed from their family, even when the environment is unsafe, is also traumatic and scary for a child/young person. Most children/young people love their parents regardless of the quality of their relationships; therefore being removed creates further stress, grief and loss and can overwhelm the child/young person’s capacity to cope.

Children/young people who have experienced trauma (abuse and neglect) will come to you with different behaviours, ways of doing and saying things, ways of relating to people and ways of coping with stress compared to children/young people who haven’t experienced trauma. Traditional parenting techniques will have a limited effect and/or could make the behaviours & feelings of the child/young person worse.
Children/young people and developmental trauma may have difficulty with the following:

**Trust:** Children/young people may find it hard to trust anyone; struggle to accurately judge the intention of another and can make poor choices in who they can trust; trust too easily making them more vulnerable to exploitation; and have difficulty forming new relationships as they don’t have the trust to do so.

**Managing Stress:** Children/young people may avoid or withdraw from day to day interactions; have difficulty sleeping; avoid sensory experiences or activities that involve even minimal stress (crowded playground, touch, bright lights); can become easily over excited; may feel a sense of disconnection from their feelings and themselves; appear to ‘zone-out’ or not be listening; behave in a way that causes others to become stressed; create chaos in a calm environment (for example; calm household with a tantrum occurring out of the blue); engage in soothing behaviours.

**Empathy:** Children/young people may feel out of ‘sync’ with others even people with whom they have a more secure relationship with; cause harm to others and not appear remorseful; misinterpret how others might feel even with simple emotions; have difficulty recognising and verbalising their own feelings; struggle to understand the feelings of another person.

**Impulse:** Children/young people may struggle to follow rules; have an inability to explain their behaviour; have difficulty understanding and adhering to social norms, particularly in group settings; are easily influenced by others; not knowing when to stop; damage own or other’s property.

**Anger:** Children/young people can escalate from calm to angry very quickly; may take a long time to calm down; struggle to take part in group activities; scare others or make them feel tense; have difficulty in making and keeping friends.

**Eating:** Children/young people may hide or hoard food, over eat and/or vomit.

**Developmentally:**

**Motor coordination** – Children/young people may have difficulties with gross motor (balance, movement) and fine motor coordination (holding a pencil, managing buttons);

**Language** – Children/young people may struggle with understanding and expressing language;

**Social** – Children/young people may misinterpret social cues, acting younger or older than age, ability to make and keep friends and interacting with others;

**Cognitive** – Children/young people may have difficulties with attention and concentration, difficulties with making sense of and retaining new information and learning difficulties.

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**Jonah’s Story**

Part 2

The ladies took Jonah to his new home and he was terrified as he didn’t know who he was living with and where he was going to stay. Jonah was placed in a separate placement to his siblings. The ladies introduced him to his foster carers Stacey and John. It was frightening at first as Jonah did not know the rules or what was expected of him. The foster carers were really nice to Jonah and they helped him set up his new bedroom. Jonah had nightmares that night and cried the entire night. He was scared to be in the bedroom alone as this was the first time he ever slept alone.

The very next day Jonah was taken to a new school. That day the carers were called to the school as Jonah was hitting the children and swearing at the principal. The carers managed to calm Jonah down and get him back into class. Every day after that school was awful for Jonah. He didn’t understand the work and the children would tease him and he would hit them or throw chairs. Jonah had no friends and would sit at lunch time by himself.

Jonah’s case worker made a referral to Child Protection Counselling Service (CPCS) to work with the carers Stacey and John dealing with difficult behaviours of Jonah. The carers explained that Jonah just doesn’t care, he breaks his toys, destroys property, gets angry really quickly and it takes a long time for him to calm down. At school the carers said that his behaviours are worst and that Jonah has been at the school for 1 term and has been suspended 3 times so far.

continued over
Parenting Children/Young People with developmental trauma

Listed below are some strategies that may be helpful to you whilst parenting a child/young person with a trauma background.

• Be aware of your own stress levels before responding to the child/young person

• Try to see beyond behaviour and understand what the child might be feeling but is unable to tell you (i.e. they are feeling scared, frustrated, insecure, sad)

• Be consistent, predictable and repetitive. The child will most likely be sensitive to changes in schedules, transitions, chaotic social situations and new situations. Consistency and predictability will help them to feel safe and secure and will help them benefit more from your nurturing. E.g. Have the same bed time, meal time each day and have the same routine, like reading a book before bed. Warn them in advance about a change in plans. Avoid going to places where there are a lot of people and things to do especially in the first few months of the placement. Repeating the above strategies will assist in the healing process.

• Time-in not time-out. The child is not deliberately seeking attention, they are needing attention. Bringing a stressed and scared child/young person close to you will help them feel safe and secure and will help them to think about their actions and feel more connected to you e.g. “I can see you are having a tough time, how about you come over next to me”. Sending a stressed child to time out will make the situation worse. Children/young persons who are in foster care were often left alone, so sending them to time out can trigger negative feelings and thoughts;

• Stop, Listen and Talk with the child/young person. It will assist the child/young person to tell you what they are feeling. Explain to the child what you see, this will help them develop language about their feelings. E.g. “You look sad today, I can tell because you have tears in your eyes”;

• Parent based on emotional age, if the child/young person is stressed or fearful they may regress to a younger age. You will be better able to be soothed if you parent them as if they were at that age. E.g. Putting a 10 year on your lap and giving them a hug and a rock may be just what they need;

• Help the child/young person to develop appropriate social behaviours by modelling them yourself and telling them what and why you are doing this (e.g. I am going to wash my hands before dinner because….);

• Be patient, progress may be slow.

Jonah’s Story

Through the use of psycho-education the Child Protection counsellor helped the carers understand the impact of abuse and trauma on Jonah. They discussed his trauma reactions and that children and young people who experience trauma can’t always verbalise their concerns but it comes out through their behaviours. They discussed that when children are “behaving badly” there is an underlying concern for the child or young person.

With the help of the counsellor the carers were able to understand that Jonah was acting out not out of anger but out of fear. It had been 3 months since Jonah had seen his mum and dad and he didn’t get the chance to say goodbye. Jonah was scared that dad had hurt mum and no one had told him. Jonah was placed far from his siblings and he wasn’t sure if they were properly cared for like the way he cared for them.

Jonah attended counselling and was able to verbalise that he in fact liked his carers and wanted to stay with them. However he was scared and confused that if he liked his carers that his parents would get upset with him. Jonah thought that if he was really bad the carers would send him away and he would keep being bad until he eventually got back to live with his mum and dad.

Jonah broke the toys not because he didn’t like them but in fact he didn’t know what to do with them. Jonah was never taught how to play and he thought breaking the toys was playing with it. CPS went to the school to see what they all can do to assist Jonah in classroom. Jonah was in class and would often be asked to answer questions. Jonah felt like he was dumb as he couldn’t read or write like the other children. When he was in reading groups the children would laugh and tease him and say that he reads like a baby.

CPCS went to the school to see what they all can do to assist Jonah in classroom. Jonah was in class and would often be asked to answer questions. Jonah felt like he was dumb as he couldn’t read or write like the other children. When he was in reading groups the children would laugh and tease him and say that he reads like a baby.

Continued over
Jonah’s Story

Jonah has been with his carers for 6 months and some things to help Jonah feel safe have been strategies that were predictable and consistent:

- Meals at the same time every day
- Bedtime at the same time every day including reading books and story time and they put a night light in his bedroom (predictability, consistency, relationship building and learning all from something fun like reading)
- They spent every afternoon with Jonah helping with his homework and reading
- Time in - When Jonah got really stressed, the carers remained calm and worked very hard to stay calm because they knew if they became stressed also, then things would get worse. They would explain to Jonah that they could see he was stressed or angry and for Jonah to come and sit with them while he was able to calm himself (Time in says to the child, I see you are struggling and that’s ok. Explaining the emotion helps children to understand their feelings helps them learn to regulate or soothe/calm themselves)
- Carer made a considered effort to notice when Jonah was doing well, it may have been the smallest thing but it was important to notice (children with emotional issue are often told about their negative behaviour by noticing the positives helps to establish self esteem and a positive self identity)
- Carers also set clear boundaries so that Jonah understood that breaking belonging was not ok, but the carers came from a place of understanding and did not use fear based discipline. Carers helped Jonah direct his feelings in other ways. This did take time but it did work (using fear based discipline makes matters worse by making the child feel shamed which then makes the child defensive and doesn’t help the child to take responsibility. Help children understand their feelings, understand when it starts to rise and give strategies for dealing with it)

While children/young people will develop at different paces to other children, they achieve age appropriate milestones generally within the same time frame.

Children and young people who have experienced abuse and/or neglect may develop at a slower rate. Children with histories of abuse and neglect may appear developmentally appropriate in one area but not in another. Research is saying to parent a child at the developmental age they are at and not their actual age. As we have discussed on previous pages children and young people who are stressed will regress in developmental age.

The guides on the following pages provide general information about age appropriate development, some causes for concern and some tips on positive strategies to assist in healthy brain development.

Important note:

- This guide does not replace a thorough assessment by a trained professional. If you have concerns about the development of a child always seek professional help.

See the professional help page in this resource.
Supporting My Brain Development

I am 0 – 3 Months

**Some things I might be doing**
- Unable to support head without help
- Hands close involuntarily
- Startle at sudden loud noises and turn in the direction of your voice
- Easy to hold and cuddle
- Indicating for a break from your attention by looking away, arching back, frowning and crying
- Focusing on a face and follow objects
- Changing my cry when I am hungry, bored or tired
- Hold a rattle if you put it into my hand
- Participate in and begin interactions through eye contact, fussing and crying
- Becoming more expressive and developing a social smile
- May start to ‘coo’ and babble
- Developing a general routine of sleep/wake times
- Need your help to sleep and settle

**Some ideas of spending time with me**
- Please don’t be afraid of ‘spoil’ me; hold, cuddle and comfort me often
- Responding to my cries and provide the comfort I need (rocking, feeding, nappy changing)
- Give me lots of attention (talk, sing, read, play) and read my cues to recognise when I need a break
- Have conversations with me by acting as if you understand me
- Allow me to explore through movement, taste and touch but set safe limits for me, to keep me safe
- Provide time on the floor for me sitting, rolling and crawling
- Try to develop routines for my bath and put me down to sleep about the same time everyday
- Sing or say the same rhyme each bedtime to me. Lullabies can help me soothe and help sleep.
- Maintain a calm environment for me
- Avoid reminders of trauma
- Tolerate clinginess and independence
- Hold my hand and grip my finger and softly stroke my hand, arms and legs up and down
- Take time out for yourself to recharge and seek support to understand and respond to my needs

**Seek support or advice if your child is**
- Unable to move each limb separately from the others
- Having difficulty tracking light, faces or sounds
- Regularly crying for hours at a time and very hard to calm
- Not showing interest or listening when you play with me
- Not feeding as expected
Supporting My Brain Development

I am 4 – 7 Months

Some things I might be doing
• Seeking more attention from you
• Responding to my name
• Starting to regulate my emotions and self soothe
• Lying on my tummy with head held up and like looking around
• Waving a rattle, starting to play with my fingers and toes
• Reaching for things to try and hold them
• Learning by looking, holding and mouthing different objects and foods
• Laughing and smiling at a person
• Following an object placed in front of my face
• Starting to notice strangers and I will be likely to be wary of strangers
• Coming to you for comfort and security
• Keeping my head level with my body when pulled to sitting
• Saying “ah”, “goo” or something similar and babble chains of sounds
• Sitting with, and then without support
• Knowing the difference between what is heard, tasted and felt
• May even be able to roll both ways and help feed myself
• Responding to others expressions of emotions
• Holding my head steady when being carried

Seek support or advice if your child is
• Not holding my head up or rolling over
• Appearing overly stiff or floppy
• Not making sounds in response to attention
• Not responding to familiar faces
• Consistently resisting all efforts for you to hold or comfort me
• Showing little interest in exploration
• Strongly resisting a routine of sleep and awake time

Some ideas of spending time with me
• Please don’t be afraid of ‘spoiling’ me; hold, cuddle and comfort me often
• Respond to my cries and provide comfort (rocking, feeding, diaper changing)
• Give me lots of attention (talk, sing, read, play) and read the cues to recognise when I need a break
• Have conversations with me acting as if you understand me
• Allow me to explore through movement, taste and touch but set safe limits
• Tell me about what you are planning to do
• Place me in different positions on the floor so that I can look at many things and explore in different ways such as sitting, rolling and crawling
• Give me time to copy you, i.e. If you smile wait for me to smile too
• Offer me one toy at a time to focus and explore on each one
• Give me one on one time—not too much passing around to different people
Some things I might be doing

- Wanting a lot more attention from you and I am sensitive to approval or disapproval from you
- Letting you know when I need or want help
- Watching your reactions to emotions, and start to recognise happy, sad, excited or fearful emotions
- Getting very anxious when separated from you and I will likely be anxious of strangers
- Telling you about my feelings more, with gestures sounds and facial expressions
- Willing to work to get to a toy out of reach and look for a dropped object
- Might be able to bottom shuffle, crawl, stand and walk with assistance
- Calm when you leave the room because I know you still exist
- Waves goodbye, playing peekaboo, clapping hands and responding to music
- Imitating gestures and recognising familiar words
- Enjoy talking/playing with family and other familiar people
- When upset seeking comfort and is soothed by you and familiar objects and is starting to self soothe
- Understanding a lot more than can say
- Moving away from things that upset or annoy
- Learning and growing in confidence by doing things repeatedly and exploring
- Picking up objects using thumb and forefinger
- Starting to use toys in more complex ways such as pouring water
- Need your help to sleep and settle
- Will start to use toys in more complex ways such as picking up a toy jug and pouring water

Seek support or advice if your child is

- Not able to calm myself sometimes
- Not able to babble or make simple gestures
- Not responding to my name or simple verbal re-quests
- Not reacting when caregiver leaves the room or returns
- Not sitting, crawling, pulling to stand or exploring the area
- Not learning to eat solids
- Not interested in toys

Some ideas of spending time with me

- Please don’t be afraid of ‘spoiling’ me; hold, cuddle and comfort me often
- Respond to my cries and provide the comfort I need (rocking, feeding, nappy changing)
- Give me lots of attention (talk, sing, read, play) and read the cues to recognise when I need a break
- Have conversations with me, acting as if you understand me
- Allow me to explore through movement, taste and touch but set safe limits
- Provide time on the floor for me so I can sit, roll and crawl
- Use meal times for the family to talk. Encourage me to hold food, cups, spoons etc.
- Name things as you use them and tell me what is going on
- Night time routine can include looking at books together
- Play games that have songs and action together or involve turn taking
- Repetition in routine helps let me know I will get the things I need e.g. Being fed and having my nappy changed
Supporting My Brain Development

I am 1 – 2 Years

**Some things I might be doing**
- Using at least two words and be able to string words together
- Drinking from a cup
- Walking, running and throwing a ball
- Saying “no” a lot
- Begin to develop my own sense of individuality
- Following simple instructions
- Pointing to an object when named
- Know some of my body parts
- Scribbling with a pencil or crayon
- Letting you know what I am thinking and feeling through gestures
- Pretend play and playing alongside others
- Taking off own clothing by myself
- ‘Feed’/’bath’ a doll, like to ‘help’
- Playing alone but I want a familiar adult nearby
- Having tantrums
- Walking for long distances by myself
- Feeding myself with a spoon with some spills

**Some ideas of spending time with me**
- Spend time with me and follow my lead in play
- Encourage, but don’t rush me - provide plenty of safe, low places to walk and climb
- Create predictable routines for me
- Teach me simple rules about behaviour and have reasonable expectations
- Help me to dress, wash my hands and use the toilet when I am ready for these changes
- Ask me to name objects
- Read me stories that are predictable with few words on each page
- Offer me thick crayons and paper to scribble on
- Teach me how to take turns and share
- Allow me to explore my imagination
- Structure, routine and limits to manage my intense emotions
- Give me options to say things like ‘do you want to hold my hand or be carried’

**Seek support or advice if your child is**
- Not speaking single words
- Not walking easily
- Not wanting to move around
- Not recognising or responding to you or to family members
- Not playing on my own for short periods of time
Supporting My Brain Development

I am 3 – 4 Years

Some things I might be doing
• Communicating freely with my family members and familiar others
• Seeking comfort and reassurance from familiar family and carers and I am able to be soothed by them
• Starting to manage my feelings better
• Extended the circle of special adults e.g. to grand-parents, babysitter
• Need you help to negotiate conflict
• Starting to play with other children and share
• I have real friendships with other children
• Becoming more coordinated at walking, running and climbing
• Walking up steps, throwing and catching a large ball using two hands and body
• Holding crayons with fingers, no fists and can turn pages in a book
• Dressing and undressing without much help
• Communicating well in simple sentences and may know some numbers
• Pronunciation has improved and I like talking about own interests
• Starting to or I am day time toilet trained
• Coping or drawing simple shapes
• Following simple rules, instructions and I enjoy helping
• Enjoy jokes, rhymes and stories
• Understanding when someone is hurt and I comfort them

Seek support or advice if your child is
• Not speaking single words
• Not walking easily
• Not wanting to move around
• Not recognising or responding to you or to family members
• Not playing on my own for short periods of time

Some ideas of spending time with me
• Offer a variety of sensory experiences and follow my lead in play
• Encourage, but don’t rush motor development e.g. provide plenty of safe, low places to walk and climb
• Create predictable routines and rituals
• Be a safe, reliable base as I explore the world around them
• Tell stories and talk with me about what I see, hear and do
• Listen and try to understand what I am saying
• Take my emotions seriously and help me make sense of them e.g. you look sad, angry
• Support interaction with peers; provide structure but otherwise let me negotiate playtime on my own
• Use words that help not hurt, say positive things
• Go on special outings such as to a zoo, bush walk
• Look for books with simple text and about events happening in my life like starting school
• Point out signs, food packets and other ways language and pictures are used when you shop
• Take me for a walk and tell me about my family and history
• Housework can be fun and I can learn skills by helping to cook or putting things away into cupboards
Supporting My Brain Development

I am 5 – 8 Years

Some things I might be doing
- Speaking in full sentences, telling longer stories
- Reading short words and sentences
- Drawing circles and squares, starting to copy letters
- Drawing persons and animals
- Climbing, hopping, swinging and may skip
- Taking pride and pleasure in mastering new skills, I may become frustrated by failure
- Trying to solve problems from a single point of view and identifying solutions to conflicts
- More likely to agree
- More internal control over emotions and behaviours
- Starting to know what is good and bad
- Active, involved in exercise and play
- May tire easily
- Ability to stay on a task has improved
- Friendships are very important to me, although they may change regularly
- May need help moving into and becoming part of a group

Seek support if the following occurs
- Not speaking in full sentences or speaking clearly enough for strangers to understand
- Shy and very fearful with other children
- Not sharing or taking turns
- Regularly having difficulty caring for my own toilet needs
- Frequently sad, worried, afraid or withdrawn
- Easily hurt by other children
- Bullying other children
- Developing unrealistic fears (phobias)

Some ideas of spending time with me
- Spend time with me doing things we both enjoy
- Tell me what I am good at doing
- Help me take on new responsibilities
- Teach me reasonable risks and safe limits
- Talk with me about ways of showing my feelings, especially about safe ways of showing anger
- Handle my anger constructively
- Create a safe environment where I can feel comfortable in talking about a wide range of issues and emotions
- Share your feelings and stories about how to deal with problems and face fears
- Support healthy friendships and encourage appropriate social activities
- Reassured by predictable routines
Supporting My Brain Development

I am 9 – 12 Years

Some things I might be doing

• Reading well
• Dressing and undressing independently
• Multiplying numbers
• Expressing a unique personality when relating to others
• Solving conflict by talking, not fighting
• Independent with toileting
• “Bouncing back” from most disappointments
• Starting and maintaining relationships with family and friendships with peers
• Regulating emotions and beginning to understand other people’s emotions and act accordingly
• Understanding jokes
• Following instructions
• Maintaining one topic of conversation for several minutes
• May look more adult-like in body shape, height and weight
• Have a growing sexual awareness and interest in opposite gender
• May challenge you and other family members

Some ideas of spending time with me

• Spend time with me doing things we both enjoy
• Give me lots of affection and spend time with me
• Help me take on new responsibilities
• Tell me what I am good at doing
• Teach me reasonable risks and safe limits
• Handle my anger constructively, tell me it’s ok to be angry but its not okay to hurt anyone
• Talk with me about ways of showing my feelings, especially about safe ways of showing anger
• Create a safe environment where I can feel comfortable talking about a wide range of issues and emotions
• Share your feelings and stories about how to deal with problems and face fear
• Support healthy friendships and encourage appropriate social activities

Seek support or advice if your child is

• Returning to baby-like or silly behaviour
• Preoccupied with violent games
• Fearful with familiar adults or too friendly with strangers
• Having night terrors
• Behaviour is difficult to control
• Absconding/truanting from school
• Showing aggression towards others
Supporting My Brain Development

I am 12 – 18 Years

**Some things I might be doing**
- Developing identity based on gender and culture
- Becoming an adult, including opportunities and challenges
- Having significant physical growth and body changes
- Puberty, menstruation, sexuality and contraception are things that will need to be discussed with me
- Be pre-occupied with self
- Have experiences of emotional turmoil, strong feelings and unpredictable mood swings
- Interdependent with parents and family
- Understanding appropriate behaviour but lack self control/insight
- Thinking logically, abstractly and solves problems thinking like an adult
- Rethinking the trauma in a more adult perspective
- May take an interest in or develop opinions about community or world events

**Some ideas of spending time with me**
- Remain calm and listen to me
- Provide opportunities for me to spend time with friends who are supportive and meaningful
- Reassure my strong feelings
- Give me lots of affection, care and reassurance without embarrassing me in public
- Help me find activities that offer opportunities to enjoy, it helps me with my self esteem
- Encourage physical activities that I enjoy such as sports and dancing
- Monitor my coping at home, school and in peer group
- Talk to me about ways of showing my feelings especially about safe ways of showing my anger
- Reassure me that it is okay to be angry, its not okay for me to hurt anyone
- Come up with simple ground rules together
- Take time to recharge yourself

**Seek support or advice if your child is**
- Reducing eye contact
- Absconding/truanting from school
- Self harming e.g. cutting, burning
- Experiencing partial loss of memory and ability to concentrate
- Showing loss of self-esteem and self confidence
- Showing personality changes and changes in important relationships
### Helplines

**Connecting Carers NSW**  
Ph: 1300 794 653  

**NSW Parent Line:**  
Ph: 1300 1300 52  
www.parentline.org.au

Connecting Carers NSW (CCNSW) provides support to foster kinship and relative carers across New South Wales. They offer carers 24 hour telephone support, ongoing education, peer support and advocacy to assist carers in their vital role caring for children and young people in out of home care (OOHC).

Parent Line is a telephone counselling, information and referral service for parents of children aged 0-18 who live in New South Wales. Our service includes the Early Childhood Intervention Infoline since early 2011.

### Useful Services

**Child and Family Health Nurses for children 0-4 years of age** - at your local Early Childhood Health Centre provides information and support on child and family health. They may also run parent groups, make home visits and help you to find other services.

**Community Health Centres** - provide a range of free services for families, including counselling, occupational therapy and speech therapy.

**Child Protection Counselling Services** - These services are located in all NSW local health districts. Ask your Community Services caseworker to make the referral. This service consists of social workers and psychologists who provide service to children and young people referred by community service where substantiation of abuse and/or neglect has occurred. These professionals are trauma informed, are family focused and child centred.

**Parenting Courses** - may be run in your local area. These can help you increase your understanding about your children and their development and can help you build on the skills you already have as parents or carers of children.

**Youth Health Services** - can be found in some local health districts. This service consists of nurses, counsellors and health care workers specifically for 12-18 year olds.

*See over for useful websites.*
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<tr>
<th>ORGANISATIONS</th>
<th>WEBSITES</th>
<th>EXPLANATIONS</th>
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<tbody>
<tr>
<td>The Australian Childhood Foundation</td>
<td><a href="http://www.childhood.org.au">http://www.childhood.org.au</a></td>
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<td></td>
<td><a href="http://www.kidscount.com.au">www.kidscount.com.au</a></td>
<td>Kidscount is a website for parents that is all about childhood. It has information that can help you to raise happy and confident children in a variety of languages.</td>
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<td>Australian Child and Adolescent Trauma, Loss and Grief Network</td>
<td><a href="http://earlytraumagrief.anu.edu.au/">http://earlytraumagrief.anu.edu.au/</a></td>
<td>The network targets psychological trauma and/or loss, and grief suffered as a result of child abuse and neglect but not limited to. Is designed for families and carers.</td>
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<td>The Child Trauma Academy</td>
<td><a href="http://www.childtrauma.org">http://www.childtrauma.org</a></td>
<td>A not-for-profit organisation, based in Houston, Texas, working to improve the lives of high-risk children through direct service, research and education - Excellent articles and on-line training</td>
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<td>Community Services</td>
<td><a href="http://www.Community.nsw.gov.au">www.Community.nsw.gov.au</a></td>
<td>Community Services (formerly DoCS) is the leading NSW Government agency responsible for community services. Lots of helpful info for carers, parents and workers.</td>
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<td>The National Child Stress Network.</td>
<td><a href="http://nctsnet.org/">http://nctsnet.org/</a></td>
<td>National Child Traumatic Stress Network (NCTSN) is a U.S.A network which brings a singular and comprehensive focus to childhood trauma. NCTSN's collaboration of frontline providers, researchers, and families is committed to raising the standard of care</td>
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<td>Post Institute</td>
<td><a href="http://www.postinstitute.com">www.postinstitute.com</a></td>
<td>Family centred approach for helping children with challenging behaviours. Includes free Youtube seminars for parents to access, how to understand challenging behaviour and what you can do to support your child and reduce the behaviour.</td>
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<td>Zero to Three</td>
<td><a href="http://www.zerotothree.org">www.zerotothree.org</a></td>
<td>Zero to three is a U.S.A not for profit organisation supporting parents/carers to nurture early development. Click on the behaviour and development section on this website.</td>
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References

Australian Childhood Foundation, (2011), Making Space for Learning - Trauma informed practices for school

Chadwick Centre for Children and Families, (2008) Assessment-Based Treatment for Traumatized Children: A Trauma Assessment Pathway (TAP)

Child Welfare Information Gateway (2011), Supporting Brain Development in Traumatised Children and Youth,

Department of Human Services, Victoria (2007), every child every chance: Child development and trauma guide

Families NSW (2007) Love, Talk, Sing, Read, Play

Perry, Bruce, Duane Runyah, Carrie Sturges, (2001), Caregiver Education Series article, Bonding and attachment in maltreated children

Van De Kolk, Bassel, (2005) Complex Trauma in Children and Adolescents

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