

WEDNESDAY 25TH MARCH 2020 STAYING CONNECTED AND CURIOUS DURING THE COVID-19 PANDEMIC

Knowledge and understanding of attachment and trauma

The Anger Iceberg

*“Developmental trauma, because of its impact upon the brain, affects the child’s ability to self-regulate, and [such children] are often reactive, impulsive and in a highly aroused state, alert for danger and any possible vulnerability. This can manifest in a number of ways, such as withdrawn, avoidant behaviours, clingy and demanding behaviours or **aggressive, destructive and controlling behaviours**. Parts of the brain that are responsive to threat are overactive, so the child over-reacts to what might be described as minor situations. Such children have “safety blindness”; that is, they do not detect signs of safety in the environment, but perceive almost everything as a threat. Traumatized children often attempt to defend themselves through **mobilised fight, flight** or active freeze responses, or even use immobilisation through dissociative behaviour, sometimes referred to as “flop” mode. These states are incompatible with learning and school; **learning, peers and adults can all elicit reactive fear and anger responses in children with complex trauma histories**, through inadvertently raising stress and arousal.” Nock, J. (2016) *Skilling Them Softly: Understanding the Particular Needs of Looked After Children and Young People in Schools*, SEN Magazine, July 2016*

Comment: Not every child and every family is lucky enough to have a parent who can offer a secure base, and thus, many children have experienced developmental, relational trauma.

Some questions for reflection:

1. Work on the developmental trauma activity.

Which of those if any, can cause developmental trauma in the first three years of life?

Are there any other situations or events that might be traumatic for a young child?

2. Developmental trauma results from anything that disrupts a child’s sense of safety and security, including:

- poverty
- abuse – physical and/or emotional
- neglect – physical and/or emotional
- parental stress
- inconsistent expectations and rules
- domestic violence
- lack of supervision

- erratic and punitive discipline
- low rate of positive interactions
- high rate of negative interactions,
- lack of interest and concern from significant adults
- poor adult role models
- parents who are violent and have arrest records
- parents who have mental health issues
- parents who are addicts or abuse substances

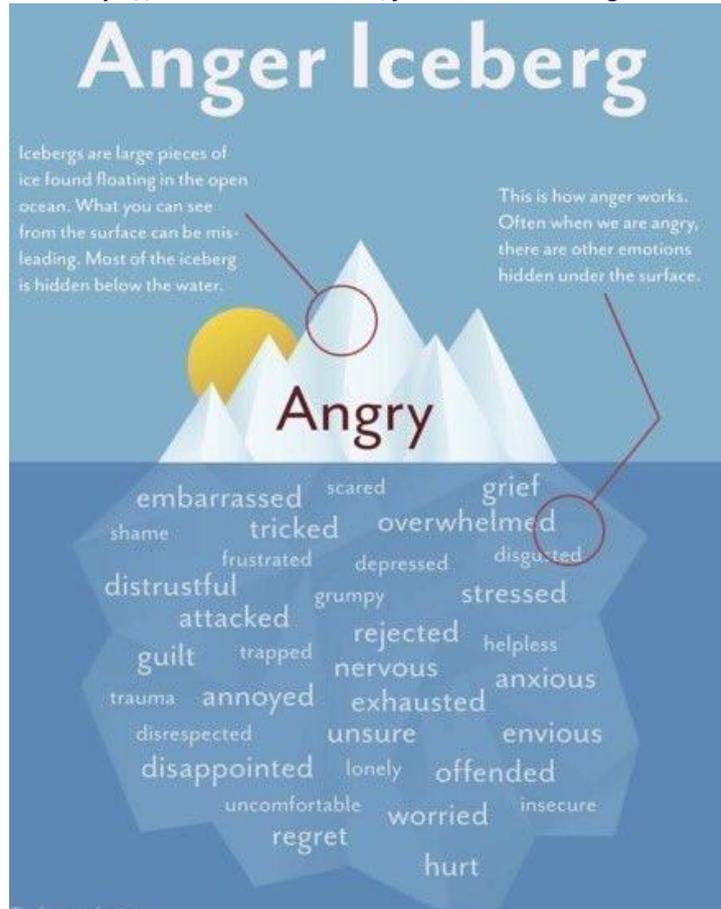
Do you teach or support any pupils who have experienced any of these situations?

How do those children present in school?

Would it be true to say that some of them have difficulty operating within the school behaviour management system?

Comment: This does not mean that they have AD(H)D or autism, or 'behaviour problems', rather that they may be suffering from unresolved trauma, which may or may not, be ongoing. They probably have had limited or no experience of feeling safe and protected during their early development. Some of them may present as very angry, maybe even aggressive, physically and verbally. It is important to consider the underlying emotions. Anger can be described as a 'camouflage emotion'; that is, it masks pain, fear and sadness. Too often there is a focus on anger and anger management, without sufficient attention to the source of expressions of anger. Unless we address these source emotions primarily, we cannot address the angry behaviour; we need to validate and explore why children become distressed and are unable to cope, which is often disparagingly described as "kicking off" in many schools. An 'angry' looked-after young teenager recently told me: "I'm just so lonely. I just want my mum". A focus on the anger had missed the problem completely. This child needs support to manage the reality: returning home to mum is not going to be possible and coping with this should be the aim of all work, support, therapy and strategies.

3. Take a look at the Anger Iceberg poster below (also available as JPG File). Think of three children you know who may be described as 'angry'. Can you map any of the 'below the water' emotions on to them? How then can you respond appropriately to their behaviour, identifying and validating emotions? How can you help them to develop strategies for managing their pain, sadness and fear?



4. Does your current approach to behaviour management take this into account, or does your approach need development?
5. **Covid-19 relevance:** There has been a lot of emphasis on 'home learning' and 'keeping things normal' for those in school. For some children, this might be helpful. For others, their fear and anxiety will be erupting as anger (or other survival behaviours). Those children (and their home-schooling parents) will need an emphasis on doing and moving rather than thinking. How are you ensuring there is provision for those children, both in school and at home?

This may be enough for you for today. If you want more take some time to reflect upon how you are using doing and movement to cope with your fear and anxiety. I'm baking, cooking, gardening and cleaning and finding it difficult to get anything done on the computer! Don't forget your self-care today.

Have a good day, keep safe and healthy and ring or email me to chat if that would help. Jenny x