

Sharing trauma informed practice ideas and strategies for the ACT's early childhood educators

What is relationship based practice and why is it trauma responsive?

Welcome

Welcome to our next blog piece for 2021, relating to trauma-informed practice for the ACT's early childhood education and care (ECEC) community.

These pieces will provide links to practice and questions for discussion that you might find useful in your work – particularly when reflecting on supporting and educating children who have experienced trauma, and their families.

Why Relational Exchange?

We have called this blog 'Relational Exchange' for two reasons. Firstly, because this reflects the importance of connection through relationship that underpins both child development and repair or healing from the impacts of trauma. The nature or quality of the relational exchanges we engage with children and their families are critical. And every relational exchange provides an opportunity for understanding and an opportunity for repair.

Secondly, because this can provide an opportunity for an exchange of ideas amongst early childhood educators and other professionals. The topics explored here and the discussion questions presented will provide you with opportunities for reflection and exploration across your team, your site or centre, your networks and the broader communities of practice.





Why relationship based practice?

Many of you have spoken about how inspired you were by Rita Pierson's TED Talk – 'Every kid needs a champion'. If you haven't seen it you can access the video at this link: https://www.ted.com/talks/rita_pierson_every_kid_needs_a_champion?language=en

This idea of every child needing a champion is reflected in what we might call relationship based practices and they sit at the heart of a trauma responsive approach. This blog entry explores aspects of relationship based practice and how we can use relationships as both a therapeutic and learning tool.

Neurosequential development- the brain develops from the bottom up

What does it mean for relationships to provide a vehicle for change? There are 3 key elements to consider in enabling this process to occur.

1. Who we are in relationships

It is very important to consider who we are in our own relationships. It is not realistic or reasonable to assume that we are relationally neutral in our interactions with children, and their families. This means that we need to be more reflective about what we bring into the relationships, and resulting interactions, we have with those with whom we work.

2. Neurobiological purpose and functions

We also need to review the neurobiological purposes and functions that underpin relationships and how they work for us all as humans.

3. Building a sustainable network

The other aspect of relationship based practice focuses on building a sustainable network of relationships around the child, in the context of our role. Our focus cannot just be on our relationship with the child, but on building the capacity of those around them to be able to engage with and support each individual child in a meaningful and ongoing way.

How we understand and experience relationships

In thinking about relationships the notion of safety is an important one. Considering the experience of safe relationships is important for us to hold as we work relationally with children in the early childhood education context.

We know that our brains crave connection with other people because it helps us survive and grow. This is especially critical in childhood but continues throughout the lifespan. Key adult-





child relational experiences contribute to developing stored models or templates of relationships that recorded in the right hemisphere and influence future relationships experienced. They also support the development of the perception of emotion in the self and others, enabling a range of capacities including empathy and humour. We are also aware that this experience of relational safety enables children to engage in learning and that the opposite is also true. Experiencing a lack of safety in relationships inhibits the capacity to focus on learning as the child's focus turns to minimizing threat and survival.

The qualities involved in positive relational exchanges can be summarized by the concept of **resonance**. Resonance incorporates characteristics of rapport, understanding, empathy and compassion, enabling us to engage in relational experiences and interactions that benefit both parties involved. These qualities are linked to the understanding that the focus of relationships is two minds making meaning from a shared experience. What do you think might be the meaning that children make from shared experiences with you? For example, do they experience the feeling of being a 'champion' in their interactions with you?

While resonance might be a new concept, the experience is often something familiar. Coming together and connecting with another person to find a shared meaning is something we invariably seek out and enjoy, whether consciously or unconsciously. Meaning doesn't have to be cortical, or conscious and language based. We know that so much of our relational interactions are non-verbal (or sub-cortical from a neurobiological perspective).

We also know that life is messy and our relational interactions can't be 'perfect' all the time. In fact, the messiness provides an opportunity for learning and managing the challenges of life. Ed Tronick explores this in his concept of 'rupture and repair'. He outlines that parents and other key adults cannot be fully attuned to young children all the time and, invariably, ruptures in the relationship happen. However, the critical aspect is that they are then repaired as this helps children to feel safe in the experience that their needs will be met and adults provide a source of safety and comfort. This has significance for us as early childhood educators as we can repair ruptures that might occur in our relational exchanges with children.

Holding a regulated state also is core in terms of our capacity to prevent vicarious trauma- or others' trauma we may end up experiencing as our own. The concept of vicarious trauma and its prevention and management goes beyond the scope of this blog entry but will be explored in later posts.

Relational neurobiology

We know that repetition builds brains and this process is reflected in our understanding of relational experiences. We build templates of relationships through repetition of relational interactions. If we experience primarily positive interactions we come to expect relational exchanges to be positive. Conversely, if we experience primarily threatening interactions we come to expect threat in all relationships. Some of the children we work with may come into our





centres primed for threatening relational interactions and respond accordingly. We may know in ourselves that we are safe and nice and relational but that child doesn't know that – and there is no point in just telling them that. We need to demonstrate those positive qualities of relationship consistently and repeatedly to help them to see that our actions are congruent with our words. Understanding this neurobiological process is fundamental to relationship based practices. We might ask ourselves – what are the experiences of relationship I want to provide the most to the children I work with? Or....how do I repeatedly demonstrate to this child that I am their champion?

The other core element of relational neurobiology is the hormones at play in relational exchanges. The two key hormones are oxytocin and dopamine and it is worth just touching on them briefly. As Dr Sue Carter (2018) tells us, 'love is not a hazy social concept but is "deeply biological", originating in the most primitive parts of the brain. A physiological explanation for love is now starting to become apparent, and oxytocin features repeatedly in this story.' This chemical is released in response to experiences such as holding a baby – giving us an experience of pleasure in the connection – but also in acutely stressful encounters, with the idea being that perhaps it is seeking to protect the body from being overwhelmed. As Carter says, oxytocin is associated with 'immobility without fear' – a deep state of safety.

Dopamine plays a big part in motivation and reward. It is known as the 'feel good' hormone and nearly all pleasurable experiences come from a release of dopamine. This includes the release of this hormone in positive interactions between children and their caregivers.

Building networks of support

How do we continue to apply these elements of relationship in our work? One key way is to build a supportive and sustainable network of relationships around the child. These relationships are ideally multi-layered, multi-generational and hold multiple perspectives in order to enact change. However, we also need to understand what is possible in the context of our role and to consider how much we can influence.

We can think about our own lives here and how we need multiple connections and relationships to best support us. For example, who is the person you most go to with work issues? Is it the same person you go to when you need cheering up? And is that the same person that you most go to when you just need to vent? And on it goes. How can we support children to find relationships in their lives that meet different needs they have at different times. Can we support the parents or carers of the children? Can we think about what we can offer each child within our centre team? Can we also think about the different expectations we have of children? How do we communicate that?

Where to from here?

We talk a lot about relationships throughout the trauma informed project and this blog explores some of the reasons why. It is worth considering and discussing in detail because a considered





and consistent response has real value for each child with whom we work but we need to work together to build that network of support. Because of that you might like to reflect on – or discuss with your colleagues – your responses to the following questions:

- What does the idea of 'every kid needs a champion' bring to mind for me?
- What do I already do in terms of the relationships I build with the children with whom I work?
- What does this blog piece tell me about why relationships are fundamental to my role as an education professional?
- What can I do to put this understanding into action? Is there a child who comes to mind who I would like to build a new or different relationship with based on this information?
- What can we do as a staff team to put this understanding into action?

References

Carter, S, 2018. 'Birth and beyond – the far reaching influence of oxytocin'. https://researchfeatures.com/2018/07/09/birth-and-beyond-the-far-reaching-influence-ofoxytocin/



