Relational EXCERMINE

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

Keeping Predictability and Routine in the lives of children in the context of COVID19.

Welcome

Welcome to our next blog piece 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.





What we know

When working with children affected by relational trauma we have learnt the importance of setting up safe and predictable environments.

We also know the importance of early childhood educators' confidence and competence in their relationship with and responses to children with relational trauma.

Building safety and connection

Children affected by trauma need stable, safe, consistent environments and relationships to help them to be calm and open to learning. They need safety, predictable and consistent routines, consistent relationships, and consistent responses

We know the importance of creating the sense of safety is to provide predictability in their day, to give them sense of "I know what's coming next"'

We know it is important to establish a supportive pattern of one to one communication with each child. We know children with relational trauma are particularly sensitive to transition experiences as they can experience any change as a potential safety threat.

We know consistent caregiving and continuity of care is vitally important to traumatised children. We know protective and predictable relationship provides attachment security which can be part of the healing process.

Building predictability

We know predictability is achieved by:

- Reliable routines, e.g. greeting children at the door on arrival in morning with a consistent signal high 5/handshake, same beginning/ending routines e.g. a song or music
- Using visual cues to help children prepare for the day sequencing...better to use photos of the actual child/activity, than clipart
- Preparing children for what's coming next
- Talking to children about your intentions
- Same caregiver/s every day as much as possible, two consistent educators are the ideal.

The role of these early childhood educators is to be a reference point and an interpreter of their environment. This enables:

• Traumatised children to respond in a less volatile way to changes and over time will build an internal platform for responding to change





• Traumatised children will learn to use others as a resource to support them

We know predictability is achieved by:

- Asking permission before touch
- Beginning and ending group sessions with same activity
- Giving warning when activity is about to end
- Ensuring relief staff continue regular routines

What we also know is that much of the above has not been possible as the impact of COVID 19 played havoc with our calm centres, our routines and predictable environments and our reliable, confident and competent trauma informed early childhood educators.

The impact of COVID 19 on trauma informed responses.

In the Trauma Responsive Professional Support Champions Network meetings, we have been discussing how difficult it has been to keep routines and predictability going for these children.

These children are being disrupted on multiple levels none of which are helping the healing process. Predictability has been impossible to maintain. There has been disrupted attendance for these children into the early years centres due to COVID 19 when positive cases that have closed centres. There have been different ways of engaging with children using online mediums that does not fit with the predictability that children need.

Routines have been impossible to keep going.

There has been a different program in the centre to address numbers of children attending again not supporting children who need routine and predictability. The most important aspect to supporting children is to have familiar strong and confident early childhood educators who can build relationships and support.

Early childhood educators have been unable to maintain the supportive relationships with children who depend on them to do so. They have been unwell, in isolation as well as providing education and care for different numbers of children in different programs.

As children respond negatively to what is going on about them, they are escalating in their behaviour as they are feeling overwhelmed by everything that is going on. The early childhood educators are also stressed and are unable to respond in a way the child needs.

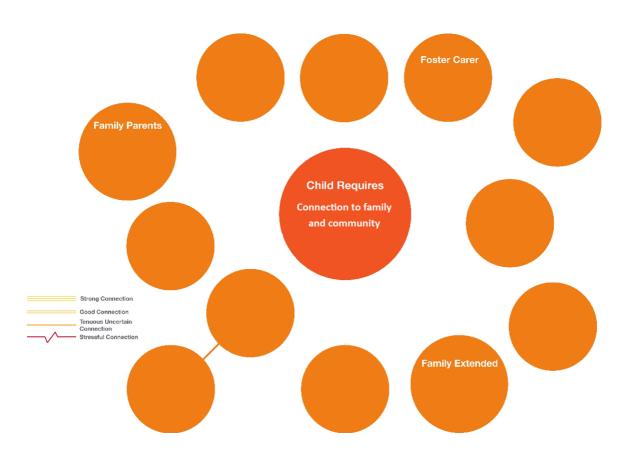
With staff absences centres are having to rely on casual and agency staff who may not be coming from a trauma informed approach and do not know the children and their needs. This makes it very difficult for everyone involved.





Mapping the child

The champions network has been experimenting with this model below as a way of supporting both the educators and the child through this very difficult time. We thought it might be useful to share how this model has been used so far.



Ideas for using this model include:

Thinking about one child and how agency and casual staff can keep their understanding of the child and their needs and their routines.

With the child named in the middle. The circles around the child can provide snapshots of the child and their needs. Such as:

Can be comforted by carrying favourite pillow.

Enjoys name of book being read to them





Needs reminding to go to the bathroom every 2 hours.

Needs support to drink and eat.

Can only manage an activity with one other child.

Works well with name of child.

These circles could be colour coded with more detailed explanation of the snapshot elsewhere if needed.

This simple visual representation can provide confidence to casual and agency early childhood educators who when working with a dysregulated child have a guide they can follow. This will also support the child who even though has a different educator than they are used to at lest has a routine and some predictability back in their day. The aim is reduce the stress and anxiety in both the educator and the child and return both to their "window of tolerance" where trauma protective trauma responses are much more possible.

Once centre is developing this model for several individual children to support early childhood educators to respond through a more trauma informed

A whole centre approach.

One centre is looking at the model from the point of view of all the educators at the centre and their interactions and responses towards a particular child they are all finding very difficult. The child's behaviour has escalated as more disruptions were experienced and the child has become more dysregulated. The educators are stressed as well and are struggling to stay in their window of tolerance and are less able to give the child the support needed. The result is that the educators are not wanting to engage with the child at all. The staff are unable to look after themselves and support each other as a team.

This centre is looking at the model as a way of bringing the educators back into a team, back into their window of tolerance for themselves and the child. To move away from no one wanting to interact with the child to sharing the care and education of a child in manageable amounts of time.

Using the model – again the child will be in the middle but in the circles around the child will be the different educators and how they will engage/interact or respond to the child for a length of time. The circles could include the time the engagement started and finished.

There was also some thinking about the educator who is with the child to perhaps wear a wrist band so everyone knows who is with the child and from the map the

activity/interaction/engagement that they are sharing. The band can be passed onto the next educator for the next activity/interaction. This way it is clear who is with the child and what is going on.





The map will show each educator having some time with the child sharing an activity/interaction/response.

It will identify who the child is with and what they are doing – the educator times need to all connect so the child is with an educator all the time. This mapping exercise is aimed at reducing the stress for the educators and the child.

Where to from here?

Relational EXGH/NBE

Across Australia the early childhood community has been affected by COVID 19. Everything has changed, they ways children are attending centres, the many absences, educators have had to be flexible and learn new skills along the way.

Trauma informed responses to children are based on time for relationships to develop between key educators and the child. This has not been possible in the chaos that is COVID 19.

It is hoped the "Mapping the Child" tool maybe useful to support casual, agency and permanent educators to step back into their window of tolerance and as a team support each other to support the children who need us.



