

Pathways to mental health and wellbeing

Relational interventions and strategies for primary school students

(based on the brain's key emotional systems)



**A child's trauma refuses to be silenced.
It's in their behaviour, their relationships.
It blocks their learning.**

TRAUMA INFORMED UK SCHOOLS

CCMH
THE CENTRE FOR CHILD MENTAL HEALTH

**That is, until someone listens to their story.
Until someone helps them make sense of
what's happened.**

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System Indicators Primary Years (5–11 years)

SYSTEM (genetically ingrained systems in the lower mammalian part of our brain)

Presenting behaviour, social and emotional ways of being in the world.

Indicators of change

CARE system

CARE system (optimally activated)

- ✓ Feeling of emotional wellbeing for much of the time
- ✓ Feeling all is well in my world
- ✓ Calm, generosity and compassion

Observation criteria (optimally activated)

- Warm and friendly
- At ease and at peace for most of the time
- Liked by others
- Sustains friendships over time
- Kind and caring towards others (age appropriate)
- Concerned for a child who is sad or hurt
- Seeks help when unhappy
- Listens well to others (age appropriate)

Underactive CARE system (some of the following)

- Blocked trust
- Controlling of other children, adults and the environment
- Not at peace or at ease with self or others
- Not able to ask for help
- Every situation (coming to school, being in school, being with others) hard to manage, shown as being passive and apparently accepting or aggressive and protesting
- Unsafe, excessive 'risk-taking' behaviour
- Feelings of worthlessness
- Trouble forming social relationships
- Lack of empathy and compassion for self or others.
- Avoidant attached: 'I don't need people. I don't go to people for comfort.'
- Developmental trauma: 'I don't care about myself and I don't care about anyone else'
- Troubled friendships (liking then falling out repeatedly)

Indicators of change

- Now the child is more at ease and at peace
- Now the child is able to trust at least one key adult
- Now the child can relate in some lovely ways to other children and /or adults
- Now the child is more engaged with /connected to the school community
- Now the child is more emotionally regulated
- Now the child sometimes/often asks for help when needed
- Now the child is more able to manage play and lunch times and learning in the classroom without support.



Optimally activated

Able to feel warmth, empathy, compassion towards self and others

Under-activated

Unable to be in healthy relationships
Unable to feel the suffering of others
Could be distress excited (bully) instead of distress averse

Over-activated

Putting others needs before their own.
Caring for others often at the expense of self-care (young carers/those worried about a parent's mental health problems)

CARE system

Interventions for children with an underactive CARE system

- The EAA anticipates, voices and meets the child's needs
- The EAA needs to be comfortable with the intimacy of real relationship and meet the child's love or affection for her (it's often deep gratitude) with grace.
- Using **PACE** (Play, Acceptance, Curiosity, Empathy) is the name of the game so the child can learn to trust you and form a secure attachment for the first time
- **Play** – Use attachment play to ground the child in the relationship (see TIS UK attachment play webinar for loads of ideas). When a child wants to verbally fight with you and pull you into a power play, resist and cross the transaction with play.
- **Accept** – Consistently validate the child's experiences and feelings, particularly when faced with a child's social defensiveness.
- **Curiosity** – Don't assume you know what a child is feeling about something unless they are telling you. If they aren't telling you, ask them. Be curious about the meaning they have given to life events. Never infer meaning. 'Will you help me understand.....?' Use

WINE questions – I wonder, I imagine, I notice 'Can you show me?' use drawing, sandtray.

- **Empathy** – After curiosity, if the child has talked about key events, feel into the child's pain, find ways to voice an understanding.
- Have at least two EAAs (attachment figures) consistently available for these children, so when one is away the other is there.
- Use every opportunity to make appropriate physical contact with the child, but be aware that touch may be inappropriate for some children (see one-page cover sheet)
- Some children with impoverished experiences at CARE will be very resistant to the EAA's attempts to connect. Anticipate the child's patterns of resistance and maintain PACE. Keep in mind the four key ways the child in blocked trust tends to relate to adults, namely:
 - to make you frightened of them,
 - to give up on them,
 - to get angry with them
 - to feel inadequate (Dan Hughes)
 - Regulate yourself, notice it's happened and keep on with PACE



- **Baby Watching is a wonderful intervention** Once a week for an hour, the whole class directly observe the growing relationship between a parent and baby with the teacher (trained in this) supporting insight, understanding and empathy – (see more about Baby Watching on the TISUK's Attachment play Webinar). It only takes £150 to train someone (online) in school to lead this (www.base-babywatching-uk.org)
 - For the child who is unattached and used to being in control, do not ask permission (for example) to take their hand, help with their coat etc. Carry out these basic actions in a matter of fact way so that the child knows you are in charge, care for them and are safe
- When there are sensory processing issues, the child is always accompanied/supported at break/lunch times until they can cope with the prevailing space/noise/energy
 - Have moments of spontaneous, warm approach behaviour/connection
 - Have a clear time structure, set place, including the journey to the room where you play/work together, the start of playing, the middle part of the session, a warning before the end and the journey back to their teaching room. Name this routine; 'Now we are ... now we are.' In this way the child feels contained by the routine and boundaries you offer
 - Use older children who have good social engagement to play and work with children with CARE needs.
 - All school staff need different expectations for children with attachment difficulties. Their internal landscapes, behaviour and capacities may be compromised and difficult to understand (e.g lack of trust, tormented relationships with other children, lack of emotional regulation)


The words to say

'I am here, I will wait at the gate for you and meet you there and we will come into school together. You can hang up your coat and I will come into the classroom with you where Mrs. S will be waiting for you ...' PROTECT through containment and structure

'Come and sit beside me' (open and engaged tone of voice and body language and containment as taking charge)

'Look at those lovely plaits of yours' (comment on the actual physicality/characteristics of the child, not what they can/cannot do)

SEEKING system

SEEKING system (optimally activated)	Underactive SEEKING system (some of the following)	Indicators of change
<p>✓ Passion for learning and exploring ✓ 'Having an abundance of motivational and psychological energy for life' (Watt 2017)</p> <p>Observation criteria (optimally activated)</p> <ul style="list-style-type: none"> • Enthusiastically engages in some tasks • Loves to explore • Has creative ideas • Keeps going, despite mistakes or frustrations • Willing and eager to try new things • Curious • Spontaneous • Likes sensory media and getting messy • Flow states and absorption common 	<ul style="list-style-type: none"> • Lethargy • Lack of motivation • Lack of will, drive, curiosity • Little or no desire for knowledge • Can't be bothered • Not open to being positively impacted by lovely sensory experiences (e.g. water, sand, sunshine) • Easily absorbed in an online / fantasy world • Flits around on the surface of life touching down briefly and moving on • May wander round the classroom aimlessly • Watches what is going on rather than joining in • Not engaged in what is going on • Says they are bored or appears so • Low energy • Cannot sustain concentration 	<ul style="list-style-type: none"> • Now the child has a far more energised engagement in life • Now the child is able to express delight in something • Now the child can be exploratory, creative and focussed • Now the child is curious about aspects of life/ people/ being in the world. • Now the child can eagerly initiate or suggest an activity • Now the child has more enthusiasm for learning some things
<p>Optimally activated</p>	<p>Under-activated</p>	<p>Over-activated</p>
<p>Energised engagement in the world Purpose, drive, determination passion</p>	<p>Lethargy Not able to stick at things Can't be bothered Bored</p>	<p>Addictions e.g. to social media, online gaming, to the exclusion of SEEKING nourishing relational experiences, new pursuits, adventures, learning</p>

SEEKING system

Interventions for children with an underactive SEEKING system

- The EAA overtly uses their well-developed SEEKING system when engaging with the child. In other words, let the child ride your dopamine system (see TISUK webinar for lots of activities you can do together for this to happen: It's called The Vital Role of Sensory Enhanced Learning in Primary schools: The why, the what and the how) The name of the game is adult accompanied play time with the child, not more playing on their own.
 - Catch the child's attention through animation and melody in your voice and body language conveying interest and excitement) through age appropriate attachment play or sensory play (see above).
 - Promote the child's capacity for awe and wonder. Invite the child into the rainbow, the puppy, the flower, the cloud formation etc. Put language to this, communicating interest, excitement and awe.
 - Provide a full range of sensory experiences including getting wet / muddy / sandy / hot / cold
- Vision:** displays using a variety of natural as well as manmade objects to

capture the child's attention. Adults direct the child's attention to different aspects of the picture/sculpture etc

Hearing: the voice and its full range, different sounds e.g. bird song, laughter, shouting, squeaking, wind blowing, running water, musical instruments that convey different mood and rhythm, musical attachment play games

Touch: different objects, textures, hot/cold, the warmth of an animal, water, wood, paper

Taste: different foods, sweet, sour, salty, sharp, hot, mild – an ideal opportunity to cook and experiment with taste/texture of a range of foods

Smell different foods, flowers, animals, smoke, fire, paint, play-doh, different natural scents

Movement: jumping, stepping, running, sliding, climbing, skipping, hopping, crawling, rolling, swimming, skating

- Support the child to know '*I am a person who can make good things happen*'
- Do this through masses of praise and encouragement when they do make a good thing, or a good thing happen

- Use the outside and nature to give the child a range of opportunities to stimulate and awaken their curiosity. Draw the child's attention to the colour of a leaf, the smell of it, the texture and so on, putting words to what the child is feeling, seeing hearing etc. Make leaf patterns, collages with natural objects, little clay people. This is done with energy, surprise, wonder and curiosity.



- Bring the outside into the school through enticing, attractive and engaging displays that are frequently changed with children helping and taking responsibility for organising and doing this. Make the environment of the school provoke delight and curiosity for all
- Use animals (dogs, hamsters, alpacas, horses etc) to stroke, smell 'can you smell

the horse's breath? It's like mashed up grass' 'Feel the softness of the fur under his neck'

- Set 'fun' problems/activities e.g. finding buried treasure in the sand and comment on texture/temperature/feel of the sand, treasure hunts outdoors; butterfly identification, pond dipping; beach scavenging, bug hunts. As well as the awe and wonder conveyed and elicited at the rich diversity of our natural world, this is an ideal time to teach the children to love, respect and protect the planet.
- Create pleasant surprises and create creative activities that the child can manage.
- Exploratory Play: the emphasis is on finding out about the world and who the child is in the world – their likes/dislikes/preferences. Here, the relationship is significant but different to that in Attachment Play. To discover themselves and the world, the child initiates the play. Adults support and stand back; the child discovers
- See SEEKING system film

The words to say

'O MY GOODNESS/WOW ...Is that a ...?' (Pointing – directing vision/attention. This can be differentiated, from simply showing the child something. Set quite complicated seek and find tasks, using your voice to communicate excitement at the discovery i.e. high squeal and/or exclamation with accompanying pointing/body language – moderating tones/energy if the child is coming from a place of fear)

'LET'S see what it feels like Smells like.....Tastes like'

'LOOK AT YOU' (focussing in with delight on some part of the child e.g. smile/hand/toe/swinging/climbing/jumping/skipping

'WHERE has it gone? Can you find it? Let's try together' (Seek and find games) 'that's really good seeking Well done! ...Is it here?'

PLAY system

PLAY system (optimally activated)	Underactive PLAY system (some of the following)	Indicators of change
<ul style="list-style-type: none"> ✓ System of social joy ✓ Fun loving with others ✓ Emotionally warm and free <p>Observation criteria (optimally activated)</p> <ul style="list-style-type: none"> • Good at playing with others • Joins in • Laughs heartily with others • Plays with new possibilities • Shares delight • Plays with ideas • Loves shared creative endeavor • Good team player 	<ul style="list-style-type: none"> • Not able to experience social joy • Lack of a sense of playfulness or fun • Overly serious and/or impervious to invitations to play • Physically holding in/back and not allowing energy to flow freely • Appears frozen • Lack of capacity to initiate spontaneous play • Unable to play with ideas • ‘Tears before bedtime’ – inability to manage stress levels around play • Physically inhibited, lack of freedom and spontaneity 	<ul style="list-style-type: none"> • Now the child has capacity for social joy • Now the child’s energy is often warm, fun, friendly, ‘up for it’. • Now the child can be fun and playful with adults and/or children. • Now the child initiates and offers ideas in projects and playing together
<p>Optimally activated</p>	<p>Under-activated</p>	<p>Over-activated</p>
<p>Playful, humorous, able to see the funny side of things, lightness in engaging others as appropriate Able to be creative and spontaneous</p>	<p>Over serious Unable to play with ideas, be creative or spontaneous</p>	<p>Climbing up and on to things. Not able to be calm and still Always on the move (when not age appropriate)</p>



PLAY system


Interventions for children with an underactive PLAY system

- Firstly, always hold in mind that social play (particularly physical social play) is hugely important for social intelligence and brain development
 - Social play triggers brain fertilisers including Insulin-Like Growth Factor I (IGF1) and BDNF (brain derived neurotrophic factor). IGF1 robustly increased synaptic strength in the hippocampus (memory system) and medial prefrontal cortex (vital a child's for learning, concentration and attention) Burgdorf et al 2010, 2015, Gunnell et al 2005)
 - (See TISUK's webinar Attachment play: the theory and neuroscience)
 - *'The emotional urge to play, when allowed abundant expression, helps construct and refine many of the higher regions of the social brain, the executive networks that allow us to appreciate social nuances and develop better social strategies. In other words, play allows us to stop, look, listen, and feel the more subtle social pulse around us.'* Panksepp (2010)
 - The EAA has a playful, 'up for it' attitude to life and is comfortable with the intimacy of real relationship rather than being in a role
 - **Attachment play** to promote social joy through connection: the attention is on the child, not some external object/toy, although that may be being used. The adult is in charge, concentrates their attention solely on the child and music, interpersonal synchrony, imagination, but all feels very safe for the child due to structure of rules or goals to the games (see attachment play games)
 - Think whether the child needs attachment play that is enlivening or soothing or both at different times in any one to one situation. If the child tends to get hyperactive then choose calming attachment play. If the child has a slow dulled energy choose energising ones (there are lots to choose from on the attachment playwebinar referred to early)
 - Play can be used to diffuse potential angry/ tricky situations. Use PLAY in PACE to support your capacity to be in relationship with the child and to cross the transaction using Play when the child wants to fight/argue/ control you.
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- The connections made through safe, warm energised adult-child relationship are enhanced by play and are fundamental to becoming attached and for the child to feel safe enough to talk with you about painful life experiences should they wish to do so
 - Understand the difference between play and banter and notice if the child becomes shamed by not understanding fun/humour, name it and accept responsibility for clumsiness to repair the relationship
 - Have parent groups to teach parents how to play
 - Use older emotionally healthy children to play with younger children
 - Meet and Greet is social play: special handshakes, greetings, special playful words, noises, songs, rhymes, word games etc
 - Accurately observe the energy in the child so that the child is met in play where they are (attunement) in terms of high or low energy, still or frenetic.

The words to say

'I see that you have a hedgehog crawling out of your ear/you have grown another foot/I've just trodden on my nose' etc
'when you giggle your nose wiggles' 'your smile and laughter are lovely – you fill the room – sing and dance with me!'
'Give us a high – guess which – 5/4/3/2/1/10 with hand/finger/elbow/shoulder/hip'


RAGE system

RAGE system (optimally activated)	Overactive RAGE SYSTEM (some of the following)	Indicators of change
<p>Able to:</p> <ul style="list-style-type: none"> ✓ Say they are angry rather than moving into verbal or physical attacks ✓ Use anger as a sign for emotionally healthy socially acceptable action ✓ Be assertive and stand up for themselves <p>Observation criteria (optimally activated)</p> <ul style="list-style-type: none"> • Assertive not abusive when angry • Expresses anger in a healthy way e.g. to lay down boundaries, to say No, to bring about positive change • Seeks help from an adult when not able to resolve something that's making them angry (e.g. an injustice, a putdown) 	<ul style="list-style-type: none"> • Gets into fights • Gets angry with others • Frustration can lead to anger • Often has explosive and/or violent outbursts • Destroys things (including their own work) • May direct anger against self. Implosions of rage e.g. head banging, hitting self, violent rocking, holding breath, self-harming behaviour • Emotional dysregulation a regular state, leading to irritability, anger with others • From anger trigger to manifestation in behaviour can be extremely quick i.e. 0-10 seconds • Little frustrations, irritations, inability to wait, quickly become major incidents • Shows passive aggressive behaviour • Demonstrates extreme protest through defecation or enuresis 	<ul style="list-style-type: none"> • Now the child (who used to explode frequently) is able tell you that they are stressed before exploding (so that they can get help to regulate and resolve). • Now the child is able to talk about their anger with you rather than moving straight into physical action/ reaction • Now the child is able to be assertive in the face of a boundary violation or injustice • Now the child is able to voice healthy anger without fight/flight or freeze

Optimally activated	Under-activated	Over-activated
<p>Able to feel and express appropriate anger e.g. to lay down boundaries, to say No, to bring about positive change</p>	<p>Unaware of own angry feelings and/or unable to express angry feelings Leaves the person vulnerable to being abused, blamed, as they are unable to put down appropriate boundaries</p>	<p>Explosive outbursts Blame Verbal/physical attacks common</p>

RAGE system

Interventions for children with an overactive RAGE system

- All staff to be trained in emotion-coaching and PACE so meet the child in the energy of their anger (without getting angry of course)
 - *'That so made you mad, when he took your car. I can see that!'* (energised voice)
 - The EAA needs to be trained in a number of strategies for attuning like this (meeting and matching in energy) with an angry child (body language, voice tone and volume)
 - Vital need for an EAA to support the child locked in anger or rage to access and reflect on possible feelings fuelling the anger e.g. hurt and fear. Use mental state talk. Don't expect them to put feelings into words rather than fists until you use a word for anger – e.g. hurt, mad, frustrated, disappointed, not understood, sad.
 - Teach all children how the triune brain works and how healthy relationships heal. Teach polyvagal theory. Teach all staff and children about the neuroscience of stress.
 - Teach all children to think about where in their body their anger starts (body sensing) and how to put language to these experiences.
 - Schools to help dysregulated children to regulate. Adults have a range of activities/exercises to help these children emotionally regulate Teach children about emotional regulation, stress responses in the brain and body and the amygdala which can be sometimes like a faulty burglar alarm and go off at the wrong time!
 - From this basis in neuroscience, children can be helped to recognise when they are getting stressed. The ones who are most vulnerable to explosive outbursts are then offered the purple card option. This means that they can hold up a purple card if they are feeling stressed, angry, about to explode as a sign to teachers that they need regulation. Each school to have its own system around this – e.g. request 5 mins time out in the yoga room or sensory room (with an EAA present), or a sensory break-sensory media at the back of the classroom. For more ideas on how this works in practice see TISUK's webinar: *The Vital Role of Sensory Enhanced Learning in Primary schools (The why, the what and the how)*
 - TISUK have found that children are usually very respectful of 'the purple card system' and do not abuse it.
 - Where a risk assessment indicates that a child is at risk of causing harm to themselves or others and there are no contra-indicating experiences regarding interpersonal trauma in the child's background, provide appropriate licenced training and support for supporting adults. Where early intervention and de-escalation strategies are not successful, staff that are known to the child should have the appropriate skills to safely contain the child using physical intervention. A physical intervention plan should be created and regularly reviewed. It is vital that any physical intervention is supported with the continued, acoustic presence of a trusted adult to support regulation (use of soothing reassuring voice and words). This process should be informed by schools' protocols, policies and procedures and shared and rehearsed with all adults in school, the child and parents.
 - All staff members to know protocols and procedures for rageful children whose stress management systems are compromised or never developed in the first place
 - Where the school has knowledge of what might be fuelling specific behaviours that are barriers to the child's learning and relationships, a 'one-page cover sheet' for their file on painful life experiences – trauma, loss etc. (Confidential but vital information and agreed by the parent to be seen by key people around the child). Provided on a 'need to know' basis to key personnel in order to alleviate triggers, avoid retraumatising and to inform the provision of care. Helps to understand origins of behaviours for example
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- EAs to be sufficiently self-aware and well-regulated to remain connected with the child in the face of their explosive anger. If not regulated, find someone who is.
 - Adults to be sufficiently well supported to set the emotional tone in the school, not the children.
 - Provide supervisory support for the EAA around children whose behaviours challenge. Their mental health is of vital importance too.
- whether or not violent behaviour at school is due to identification with an aggressor. E.g. Mark Johnson's (TISUK consultant Lived experience and author of 'Wasted') speciality in primary school was punching children in the face, Why? Because at home his Dad punched him in the face on a regular basis.

The words to say

'WOW (any word/sound with 1 syllable) that was awful for you' (same energy/fire as the child's angry energy to meet them/attune with them and Accept (PACE) their feeling

'I am really interested about that very loud shouting and swearing. Can you help me understand?' (Curiosity)

'AHH (jumping backwards) you have blown me away!' (Playful)

'It must be so very hard when you are so cross that everyone goes away from you – so on your own Alone with such strong/big feelings' (Empathy)

FEAR system

FEAR system (optimally activated)	Overactive FEAR system (Some of the following)	Indicators of change
<p>The ability to:</p> <ul style="list-style-type: none"> ✓ Feel fear appropriate to the situation rather than neurotic anxiety ✓ Voice fears and seeks help with them as appropriate ✓ Regulate fear response in non-dangerous situations and take action to manage fears <p>Observation criteria (optimally activated)</p> <ul style="list-style-type: none"> • Courageous • Takes risks to approach children to play with them • Is 'up for it' in new situations, or with new people so 'feels the fear and do it anyway' • Knows when they need support in a frightening situation from a trusted adult • Up for a challenge 	<ul style="list-style-type: none"> • Anxious and on-edge • Watchful, hyper-vigilant and often worried (coming to school, leaving family, playing, working) and seeing the world through a veil of fear • Outbursts of anger which can mask fear • Stillness – being 'petrified' • Frightened of making mistakes so not joining in • Obsessive compulsive behaviours • Even minor changes are difficult to negotiate – the start of day, play time, end of day is difficult to manage. Weekends and holidays may be impossible for the frightened child to negotiate and manage • Finds change difficult • Worries about getting things wrong • Complains about physical ailments • Fearful, avoidant or disengaged in trying new things • Physically flees when overwhelmed • Freezes when faced with a new situation • Running (flight), fight and/or being frozen (dissociated). • Not sitting still, may constantly move their leg, tap their foot, fiddle with things, as well as bigger movements 	<ul style="list-style-type: none"> • Now the child is more assertive • Now the child expects to be heard because they can be assertive with peers and adults • Now the child can ask for help when s/he is afraid of something or someone • Now the child can say when s/he is frightened (improved affect labelling) • Now the child comes to school far more confidently and can take his/her place beside other children in both formal (classroom) and informal (playground) situations • Now the child is able to accept emotional regulation from an EAA far more easily when needed
Optimally activated	Under-activated	Over-activated
<p>Able to feel fear appropriate to the situation and take action to alleviate the fear</p> <p>Able to voice fears and get help from an EAA for emotional regulation</p>	<p>Denied/blocked feelings of fear</p> <p>Risk taking</p> <p>Puts self in danger</p>	<p>Anxious/worried a lot of time</p> <p>Panic attacks phobias</p>

FEAR system

Interventions for children with an overactive FEAR system

- Calm the body first
- There should always be a safe base person (EAA) in the school to which the fearful child can go and they know where to go and when they can go
- All adults in school need to know what the observable behaviours are for a child who is frightened. This includes the more 'frozen', hidden and / or dissociated behaviours that are more difficult to recognise. Fearful children can go under the radar. They really need support so that they can begin to live a life that is not experienced through the veil of fear with its serious ramifications. They need urgent help to deal with the stultifying impact of fear for their future psychological /emotional wellbeing
- All adults in the school need to know the impact fear has on the stress management system. Children locked in fear have miserable, unfulfilled and painful lives. They cannot make friends easily or learn.
- At least 2 consistent EAAs need to work with a child who is fear-based so that continuity is ensured if one is not in school.



- The EAA's objective is firstly to make the child feel safe and then when the child trusts the adult(s) and feels nurtured/cared for, they can be supported. Then they begin to make sense of their inner reality that, up to now, has been defined by fear. Adults use WINE, PACE, arts and creativity to help the child make sense of their unresolved trauma.
- Have well-structured and boundaried routines and procedures with which the child is familiar
- Sing, dance, move, play/make music with the child. When more confident extend this to include other children and adults
- Introduce the Massage in Schools Programme
- Explore Child Rights with all children; discuss interventions – build this into classroom time. Compose a song (e.g. Miss Kendra) for the children to recite/sing
- Watch puppet plays to show violation of rights
- Practice assertiveness training
- Educate about potency through breathing, movement and good touch
- Teach children the neuroscience of fear, Polyvagal Theory, strategies for calming our stress management system, how to support each other when fearful and how fear is natural/keeps us safe
- Be extremely sensitive about invading the frightened child's space in relation to proximity and noise 'Is it ok if I come and sit near you?'
- Be aware of the potential for children to be ashamed about being frightened. Our culture encourages bravado, especially for boys
- Some children who are very frightened cover their fear through pseudo-

competency by calling the shots, running the show, controlling what is going on through the volume of their talk, doing daring and risky activities, being very clever. They use these strategies to cover their fear and not expose their vulnerability, thus avoiding intimacy. Make no demands of them, do not expect the child to perform, produce something or talk while they are with you, and if they do seem to be engaging in these behaviours, do not let it go unnoticed. Instead you gently call the shots with sensitivity knowing that the prospect of losing control for them will be very scary. Use a running commentary about them, communicating your care and attention, requiring nothing from them. Take every opportunity for appropriate physical contact. If the child has been abused this needs patience and sensitivity on the part of the EAA but this should not preclude physical contact

- Use Talk Time for parents, staff groups and children so that they can be educated about fear and supported to deal with it in a mentally healthy way.


The words to say

'I notice you are being very still I wonder if you are feeling alone and frightened I wonder if it is just too noisy in the classroom today. I am here for you now'

'How smart of you to go to your special safe place at the beginning of the day as well as break. Let's meet and I will come with you'

'It seems the start of the day is tricky for you. I'm wondering if it is because it is hard for you to leave home at the moment... how about we give Mum a call or a text now so you can tell her that you are hurting and missing her loads' (previously agreed by mum)

PANIC/GRIEF system

PANIC/GRIEF system (optimally activated)	Overactive PANIC/GRIEF SYSTEM (some of the following)	Indicators of change
<p>✓ Able to feel, talk about and express grief appropriate to significant loss.</p> <p>✓ Able to seek help with the pain of loss.</p> <p>Observation Criteria (optimally activated)</p> <ul style="list-style-type: none"> • Goes to a trusted adult for comfort with the emotional pain of loss. • Knows on some intuitive level that '<i>It is not possible to grieve without the presence of another</i>' (Bowlby, founder of Attachment theory) • Able to reminisce with an EAA 	<ul style="list-style-type: none"> • Depressed • Frozen (can be in unbearable pain) • Age inappropriate separation anxiety • Hopeless • Frequent crying (maybe inconsolable) • Distracted, can't focus on learning • Sleep disturbances, including insomnia • Sometimes managing and sometimes not • Intense outbursts of rage, when traumatic loss has triggered neurochemical changes leading to anger (Chester et al 2013) • Appears lonely and lost • Gets defeated easily • Anhedonia • Displays superficial sense of being OK • Self-medication: screen time, food 	<ul style="list-style-type: none"> • Now the child can ask for help from an EAA to talk about the painful loss • Now the child is able to articulate feelings of emotional pain through the arts, creativity and words to say it • Now the child can talk about missing and longing and yearning • Now the child can understand that grief is a process and that it goes through different stages • Now the child can at times be a support for others who are unhappy or sad • Now the child can express their grief openly and freely

Optimally activated	Under-activated	Over-activated
<p>Able to feel and express grief/cry appropriate to significant loss or rejection</p> <p>Missing someone/longing appropriate to the situation</p>	<p>Denied/blocked feelings of loss</p> <p>Unable to cry and grieve about a significant loss</p> <p>Stiff upper lip/bottled up feelings</p>	<p>Depressed, overwhelmed by sadness, hopelessness defeat, despair</p> <p>Separation panic/desperate neediness in significant relationships</p>

PANIC/GRIEF system

Interventions for children with an overactive PANIC/GRIEF system

- Settings have policies and plans and appropriate training to provide timed sessions (group or individual) for children suffering from loss/bereavement and importantly to include those who have been 'ditched' by a friend (also agonising)
- The EAA needs to have done the necessary personal work around their own losses, rejections so that s/he can be truly emotionally available for the grieving child
- Be brave enough to get in beside the grieving child and use PACE appropriately to help the child grieve loss/change/transition.
- Use straightforward language to help the child process the loss *'I heard that your father was taken in by the police last night. I am so sorry'*
- Help emotionally regulate the child who have moved from loss to anger. Attune through matching strength/pitch/volume of your voice. When the child connects with you then start to regulate and calm them. When s/he begins to settle, name what has happened: *'I get it. You feel so angry about this.... So sorry you feel so wretched So hard when everything changes...'*
- Children can come in and out of the intense feelings associated with loss. Being at school can be a life-saver, giving the child 'time out' from the painful home situation.
- The child needs to know that the EAA is available if and when needed and where you will be. *'... I want you to know that I am here and thinking of you. ...Would you like to keep my little dog puppet (he's called Muffin) in your pocket today so you can hang on to him if needs be and remind yourself that I am here thinking of you?'*
- Some children will be emotionally numb or even dissociate from what has happened because it is just too painful. You can still help them, but you may need to empathise through metaphor e.g. therapeutic stories. Try *The Day the Sea Went Out and Never Came Back. The Frog who Longed for the Moon to Smile.* (Margot Sunderland)
- The EAA to support the child in activities to help them externalise their feelings, put words to them so that the loss can be grieved and assimilated so the child can get on with their life. Some examples: Big Empathy Drawing, words unsaid, stories, sand trays, Emotion work sheets; see *Draw on Your Emotions* by Margot Sunderland (photocopiable)
- PACE: Be curious about the meaning of the loss for the child. Do not make assumptions: the death, loss, change may be a huge relief to the child
- Use rituals to help the child reminisce about the person/animal/place. (Reminiscing brings down cortisol levels and reduced negative feelings (see Speer and Delgado 2019)
- Making memory boxes, collage of photographs, planting bulbs in a special place, having a special object that represents that person animal/place. Be alongside the child during these activities using WINE and PACE to help them grieve and process their loss.
- Use Talk Time so children can share their experience, retell their experience and help build peer support.
- Help all children understand what grief/loss/change means; how the pain of loss impacts on brain, mind and body; the stages of grief; the neuroscience of loss; how important it is for our health that we do not ignore or suppress our grief.

The words to say

'...How awful for you ... I wonder how you are doing ... I imagine it feels like everything has gone upside down...'

'O dear, Josie is playing with Naz again and you are very upset about it. Feeling left out. Feeling left out is such a painful feeling ... I wonder if it is a bit like that at home with the new baby ... so VERY hard to feel left out ... Like you have lost everything that was important to you ... Everything has changed ... So hard ... I imagine that as well as feeling hurt in your heart you are angry too ... I wonder if you would like to say "mummy I want to be in your arms and I want you to look at me and I want the baby to go back ... my heart is hurting because it feels like I have lost you" and I wonder if you would like to shout at Josie and Nnaz and say, "I am feeling left out, stop it now"'

'... for some of you, moving classes/school next term will be VERY hard, others will be looking forward to it. I want you to show me how it is for you using the sand tray so I can understand a bit more about this experience for you.'

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