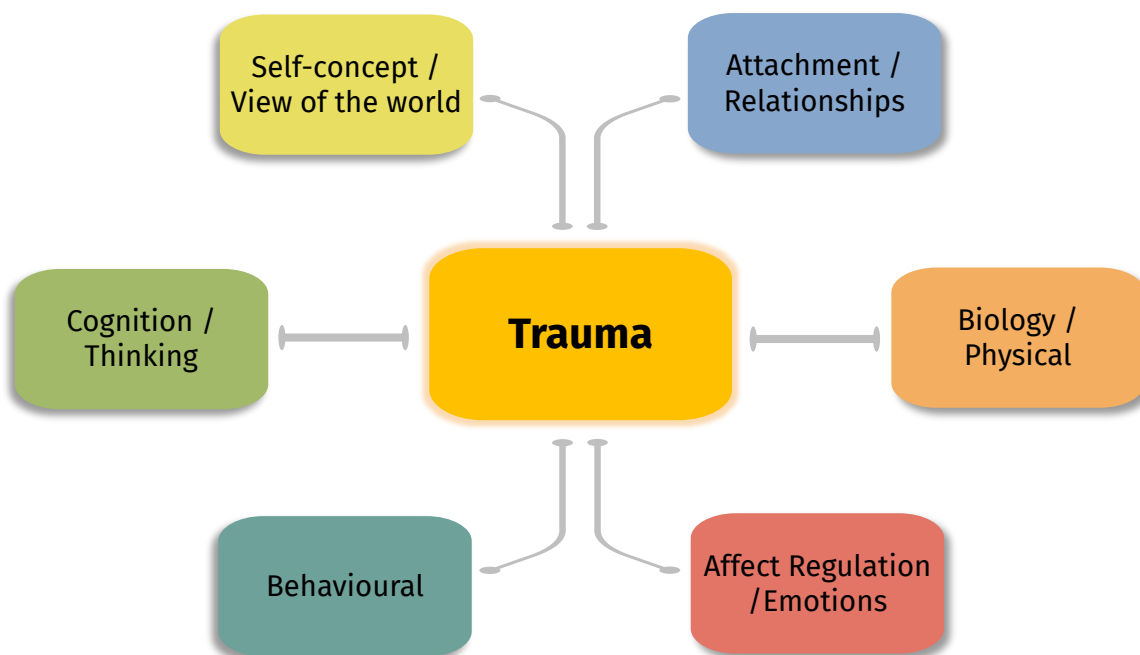


Some Difficulties Following Trauma: The impact of complex trauma across different domains

Developmental/complex trauma happens when young people face repeated trauma during their early years. These events are often interpersonal in nature, such as physical or emotional abuse, neglect, or exposure to violence. It is not just a single event; it is a series of harmful situations that can shake a young person's world. Such experiences can change how a young person's brain develops and functions.

One key aspect of developmental/complex trauma is that it affects multiple areas of a young person's development - their foundations are unstable, and the house was built without the proper materials. Exposure to complex/developmental trauma has far-reaching and long-lasting (even intergenerational) effects/impacts. It can permeate every aspect and domain of a young person's life and may not be clear and/or obvious. Understanding what these impacts are is critical as it helps us to better address the needs of the individual and to foster healthier futures.

The impact of trauma can vary, depending on their experiences, coping mechanisms, and the support they receive. However, there are some commonalities. The impact extends beyond the immediate emotional responses and can significantly impact every aspect of a young person's life. These can be captured under six main themes. What each of these may look like is outlined below – examples provided are not an exhaustive list.



These challenges do not disappear when the young person becomes a young adult. Adults who have experienced childhood trauma very often continue to struggle with profound difficulties in ways that map across the six areas mentioned above. These are explored in more detail below.



Imagine running a race with a weight strapped to your back. You can keep going, but it's much harder than it should be. Many live with the heavy baggage of their past traumas, feeling the weight everyday making it challenging to process, act and respond to everyday interactions and situations.

'Trauma creates change you don't choose'.

(Michelle Rosenthal)

Attachment / Relationships

Examples of what it may look like:

- Uncertainty about the reliability and predictability of the world
- Problems with boundaries
- Mistrust and suspiciousness
- Social isolation
- Interpersonal difficulties
- Difficulties connecting
- Difficulties attuning to other's emotional states
- Difficulties with perspective taking
- Shows little 'guilt' / 'remorse'
- Difficulties enlisting other people as allies
- Need to 'control' environment & people
- Indiscriminate affection
- Demanding or clingy
- Difficulties having fun
- Poor peer relationships / social skills
- Independent – don't need others
- Difficulties asking for help or always needing help.

For example:

Jacob is a 16-year-old with a developmental trauma history. Jacob finds it really hard to trust other people, he often takes advantage of others when he can, he rarely seems to show empathy towards others and does not seem to care when he is faced with harsh consequences for his behaviour.



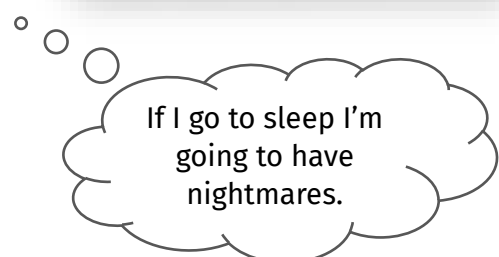
Biology / Physical

Examples of what it may look like:

- Sensorimotor problems
- Hypersensitivity to physical contact
- Higher pain threshold
- Problems with coordination, balance, body tone
- Accident prone
- Difficulties localising skin contact
- Somatisation
- Poor hygiene
- Muscle tension
- Sleep disturbances
- Toileting issues
- Over / under eating
- Poor handwriting and/or pencil grip
- Overwhelmed by noisy environments
- Increased stomach-aches, headaches
- Medical problems affecting many body systems, e.g., pelvic pain, asthma, skin problems, autoimmune disorders, pseudo-seizures, gut issues, heart conditions.

For example:

Hayley is a 14-year-old with a developmental trauma history. Hayley wets her bed almost every night and seems unconcerned about the odour in her bedroom and on her body each morning. She also struggles to get to sleep, she often complains that she feels hot, and requires a fan and or air conditioner on in her bedroom even during the colder months if she is going to get any sleep at all.



Affect Regulation/ Emotions

Examples of what it may look like:

- Difficulties with emotional self-regulation
- Difficulties describing feelings and internal experiences
- Problems knowing and describing internal states
- Difficulties communicating wishes and desires
- Difficulties recognising emotions in others
- Poor emotional language
- Intense emotions sometimes without understanding why they have come up
- Feelings that spiral out of control such as fear, dread and shame.
- Prolonged 'melt-downs' over 'small things'
- Often hyper-vigilant, fearful & anxious and/or often detached and distant, as if living in a daydream and disconnected from reality, forgetful and hard to reach.

For example:

Jia is a 17-year-old with a developmental trauma history. Jia typically describes his emotional state as either feeling angry (really angry) or OK'. He often presents with explosive episodes of rage and later reports that he does not remember much of what happened or what he did during these episodes.

I don't understand your/my emotions!

Behavioural

Examples of what it may look like:

- Poor modulation of impulses
- Aggression against others
- Restlessness, fidgeting, moving around
- Pathological self-soothing behaviours
- Eating disorders
- Substance abuse
- Excessive compliance
- Oppositional behaviour
- Difficulties understanding and complying with rules
- Communication of traumatic past by re-enactment in day-to-day behaviour or play (sexual, aggressive, etc)
- Cruel
- Lying, blaming, minimising
- Increased high-risk and/or pleasure-seeking behaviour
- Fight, flight, freeze, people pleasing
- Struggles with transitions, change, loss
- Boundary setting can trigger 'big emotions' / noncompliance.

For example:

Alisha is a 12-year-old with a developmental trauma history. She seems to do things, often very unsafe or 'silly' things without thinking. Alisha is very impressionable and often engages in problematic behaviours when prompted or encouraged to by peers. A lot of work has been done to help Alisha learn to problem solve better and think before acting, however Alisha seems to keep getting herself into trouble.

Fight, flight, freeze, people pleasing keeps me safe!

Cognition / Thinking

Examples of what it may look like:

- Difficulties in attention regulation and executive functioning (thinking and reasoning skills)
- Memory problems
- Lack of sustained curiosity
- Problems with processing new and different information
- Problems focusing on and completing tasks
- Difficulties planning and anticipating problems with cause & effect thinking
- Problems understanding own contribution to what happens in different situations
- Learning difficulties
- Delays with language development including understanding what people are saying and expressing oneself using words
- Forgetfulness or confusion
- Problems with orientation in time and space
- Problems being able to correctly see, hear and understand what is going on in the environment around them
- Difficulties organising self.

For example:

Hayden is a 15-year-old with a developmental trauma history. He has been diagnosed with an Intellectual Impairment. He struggles with schoolwork, especially paper-based work (reading, writing, maths etc). When people first meet him, they are typically unaware of his underlying cognitive difficulties as they are hidden behind routine social interactions. This causes problems for Hayden when people assume that he is lazy and/or defiant when, for instance, he is unable to complete schoolwork or fill out forms.

I don't understand ...
I can't ...

Self-concept / View of the world

Examples of what it may look like:

- Lack of a continuous, predictable sense of self
- Poor sense of separateness from others
- Disturbances of body image
- Low self-esteem
- Self-blame
- Experience being labelled by others
- Intense shame and guilt
- Sees self as bad, and often triggers responses from others that further reinforce this negative self-view
- Outside world seen as an unsafe place
- Other people seen as unavailable, neglectful, rejecting, and unresponsive
- Self-doubt and self-criticism
- Saying 'I'm stupid' or 'everyone hates me' etc.

For example:

Sinead is a 13-year-old with a developmental trauma history. She often seems to want to be treated badly, sometimes escalating continually until finally someone 'loses it' and responds aggressively, to which she responds by calming down. Sinead also tends to find it hard to accept praise and positive feedback, sometimes even responding aggressively to such experiences.

I'm not safe/I'm bad