Trauma and young people: Taking a strengths approach

Louise Hayes, PhD Clinical Psychologist - MAPS, CCLIN, Adjunct Senior Research Fellow, La Trobe University,

Website for training, professional development, resources

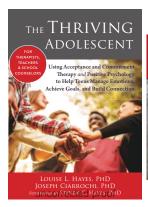
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Website for research, resources on DNA-V

www.dnav.international

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DNA-V as a unified framework for growth

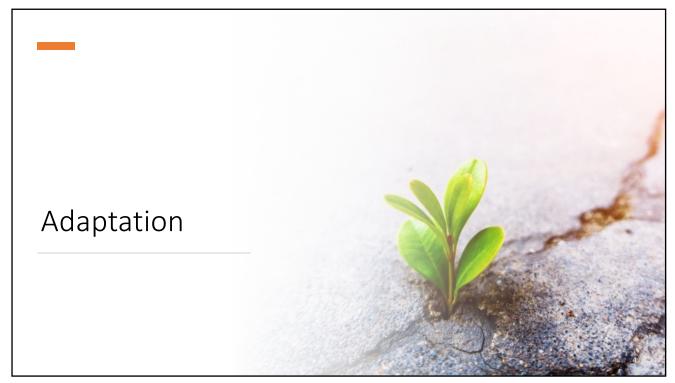


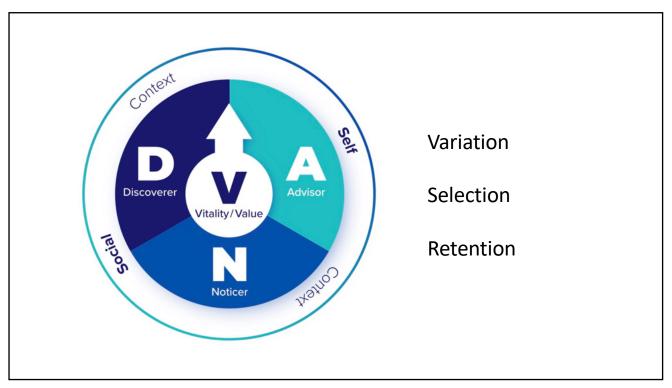


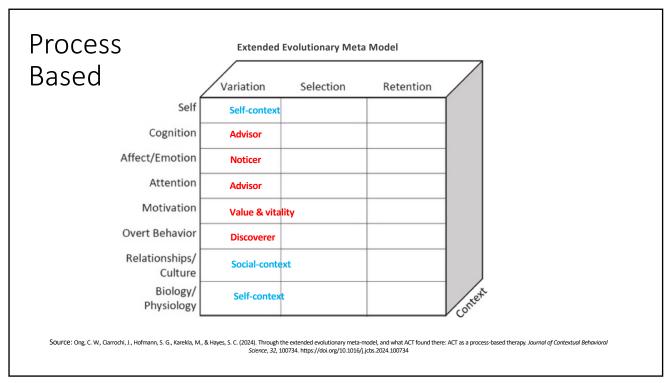


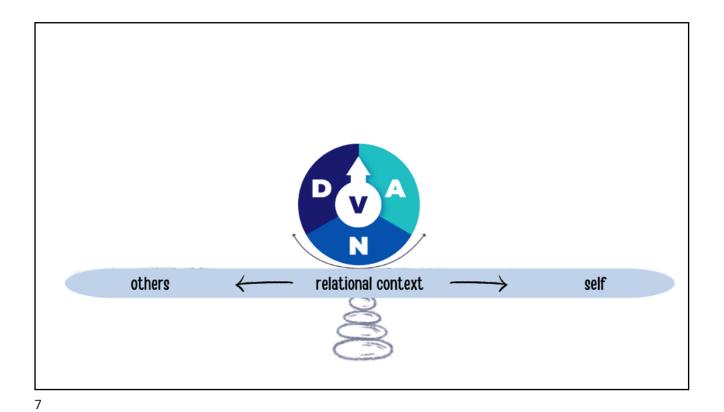
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Theoretical and evidence foundation

Functional contextualism

Evolution science - adaptation is based on variation, selection and retention

Selection by consequences

Biological threat/safety Attachment theory Operant principles Relational frame theory

Processes with empirical evidence

ACT processes

Behavior therapy Cognitive therapy* Self determination/Positive psychology

DNA-V — as a framework bringing all together



Developmental psychopathology

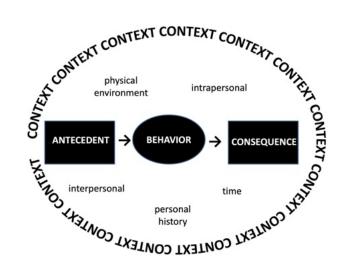
- Assumes normative stages
- Inadequate and incomplete unless considers adaptation as normal
 - (Ellis et al., 2012)
- Evolutionary perspective
 - Adaptation
 - cost-benefit analysis
 - contextualised



 $organic is m-assumes \ normative \ stages \ of \ growth$

Functional contextualism

- · Assumes behaviour occurs in a context
- Assumes behaviour is/was adaptive in that context
- · Evolutionary perspective
 - Adaptation
 - · cost-benefit analysis
 - contextualised



Contextualism: assumes behaviour adaptive (worked) in a specific context

Contextual Image: J and M Villatte (2013) ACBS Boot Camp Reno

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Acute trauma

Sometimes called simple trauma (also Type I)

Time-limited, sudden, and unexpected events that are perceived as traumatic:

- Shorter-term problems
- · Less risk of long-term mental problems
- Argued that the 'simple' trauma is too simplistic especially in development

Howard, J., L'Estrange, L., & Brown, M. (2022). National Guidelines for Trauma-Aware Education in Australia. Frontiers in Education, 7, Article number: 826658. https://eprints.qut.edu.au/232311

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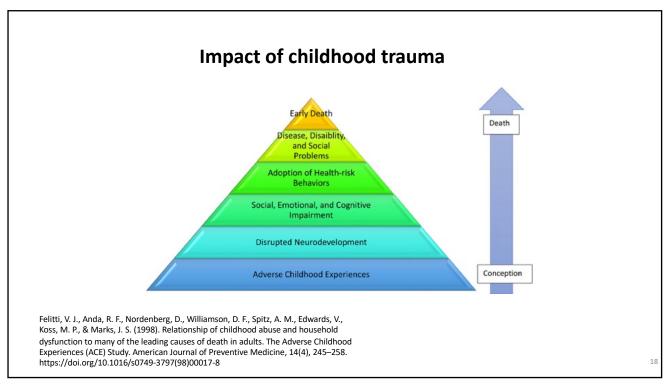
Complex trauma - betrayal

Complex trauma (also known as Type II or betrayal trauma), impact of repeated relational harm experienced by children at the hands of those who should be loving, nurturing, and protecting them

- physical, sexual, and emotional abuse,
- · physical, and emotional neglect,
- family or other relational violence.

Howard, J., L'Estrange, L., & Brown, M. (2022). National Guidelines for Trauma-Aware Education in Australia. Frontiers in Education, 7, Article number: 826658. https://eprints.qut.edu.au/232311

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Adverse Childhood Experiences

- Bereavement
- Bullying
- Community violence
- Domestic violence
- Emotional abuse
- Food scarcity
- Forced displacement
- Foster care system experiences
- Illness/medical trauma
- Interpersonal violence
- Impaired caregiver

- Kidnaping
- Living in unsafe environments
- Multiple deaths and traumatic loss
- Natural disasters
- Neglect
- · Peer rejection
- Physical abuse
- · Physical assault
- Political violence
- Poor academic performance

- Poverty
- Racism over time
- School violence
- Serious injury/accident
- Sexual abuse
- Sexual assault/rape
- Terrorism
- Traumatic loss
- War

ACEs outcome studies

Adults with at least four ACEs - increased risk of all health outcomes compared with no **ACEs**

- · weak or modest for physical inactivity, overweight or obesity, and diabetes (ORs of less than two);
- moderate for smoking, heavy alcohol use, poor self-rated health, cancer, heart disease, and respiratory disease (ORs of two to three),
- strong for sexual risk-taking, mental ill health, and problematic alcohol use (ORs of more than three to six),
- · strongest for problematic drug use and interpersonal and self-directed violence (ORs of more than seven)

The outcomes most strongly associated with multiple ACEs represent ACE risks for the next generation (eg, violence, mental illness, and substance use)

Hughes, K., Bellis, M. A., Hardcastle, K. A., Sethi, D., Butchart, A., Mikton, C., Jones, L., & Dunne, M. P. (2017). The effect of multiple adverse childhood experiences on health: a systematic review and meta-analysis. The Lancet. Public Health, 2(8), e356–e366. https://doi.org/10.1016/S2468-2667(17)30118-4

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ACEs and Psychological Flexibility

Screening for ACEs along with psychological flexibility measure

Psychological flexibility moderated the relationship between self-reported ACEs and depressive symptoms.

- High psychological flexibility associated with less depressive symptoms - even when ACEs were higher
- Average psychological flexibility had no relationship between ACEs and depressive symptoms
- Low psychological flexibility associated with more depressive symptoms when experiencing higher numbers of ACEs.

Hostutler et al (in press). ACEs Screening in Adolescent Primary Care: Psychological Flexibility as a

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Moderator. Families, Systems, & Health

ACEs - not modifiable

but,

Psychological Flexibility – is modifiable

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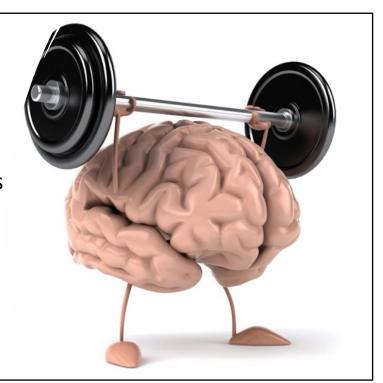
 $Hostutler\ et\ al\ (in\ press).\ ACEs\ Screening\ in\ Adolescent\ Primary\ Care:\ Psychological\ Flexibility\ as\ a\ Moderator.\ Families,\ Systems,\ \&\ Health$

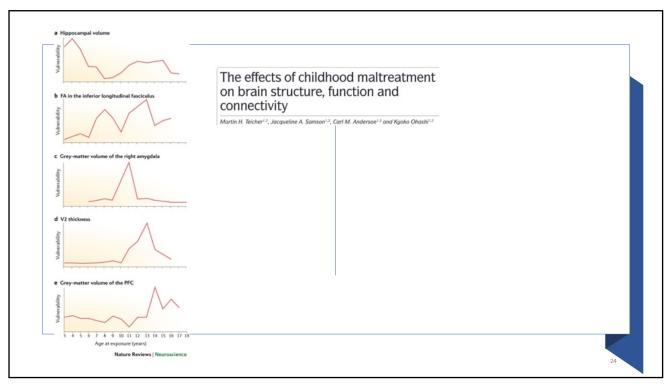
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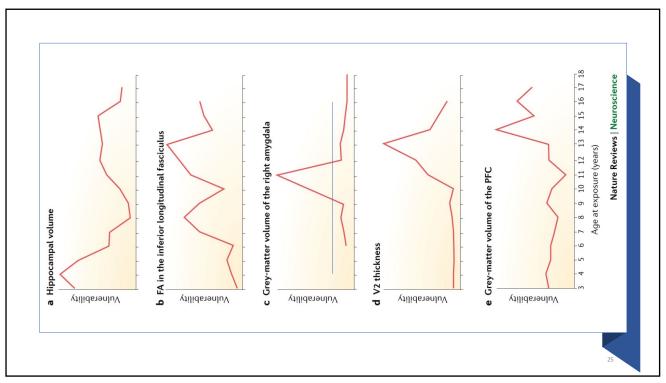
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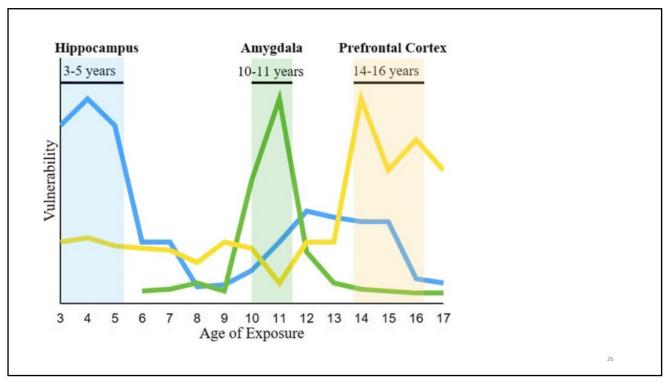
Neuroplastic adaptations rather than damage

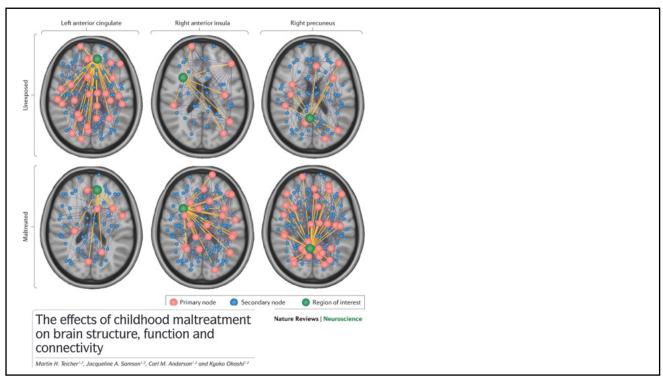
(Teicher et al. 2020)

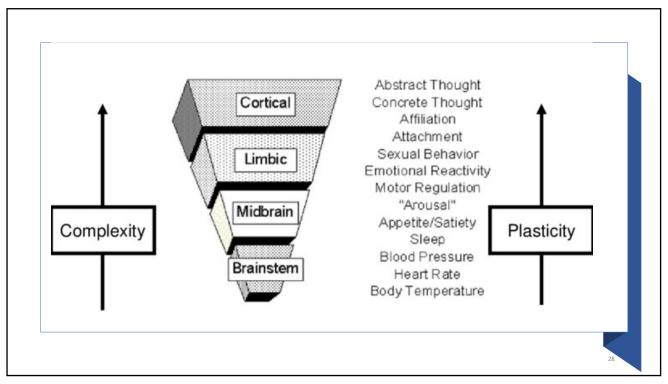












Brain architecture and implications for treatment

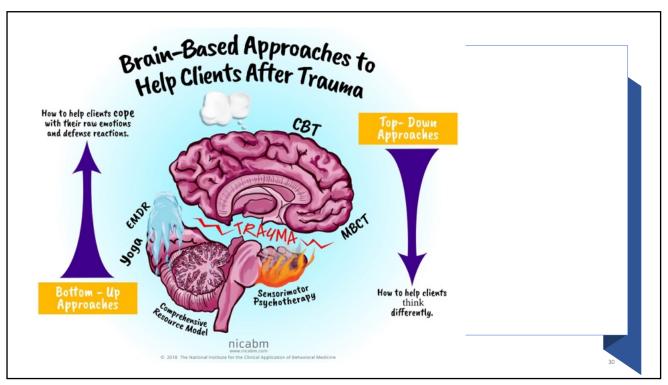
A young person's response to trauma is individualised

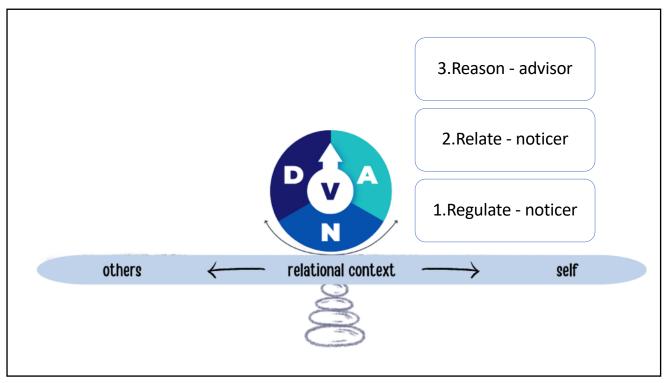
Connectivity in neural structures may be important for therapists to consider – e.g whole DNA-V in context does this

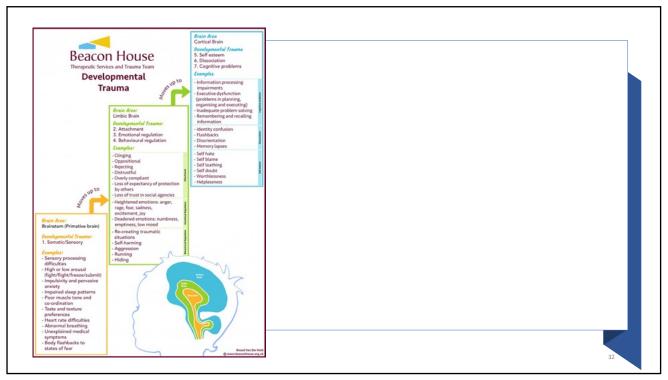
Providing a consistent relational foundation in the present -- the mismatch between their past experience and present creates an opportunity for new learning

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Aware

- Understanding the widespread impact of trauma
- Understand neurological, physiological, biological, psychological, and social effects
- Shift the perception of all professionals from "What is wrong with you?" to "What happened to you?"

Goddard, A. (2021). Adverse Childhood Experiences and Trauma-Informed Care. Journal of Pediatric Health Care: Official Publication of National Association of Pediatric Nurse Associates & Practitioners, 35(2), 145–155. https://doi.org/10.1016/j.pedhc.2020.09.001

Relationships are fertile ground for recovery

A child's current level of relational health is the strongest predictor of their current wellbeing and functioning, even more so than their trauma history (Perry and Dobson. 2010)

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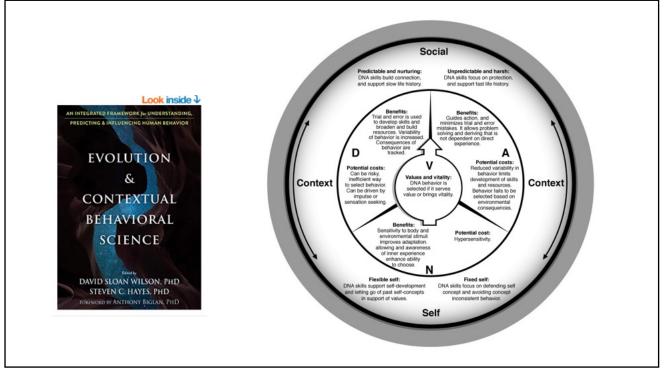
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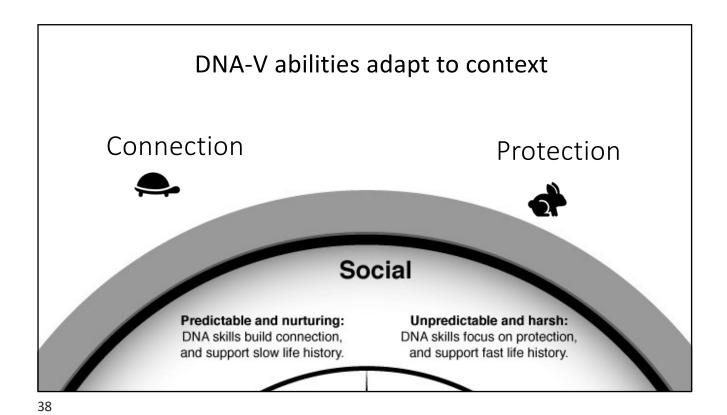
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Time spent getting to know a young person is time spent well

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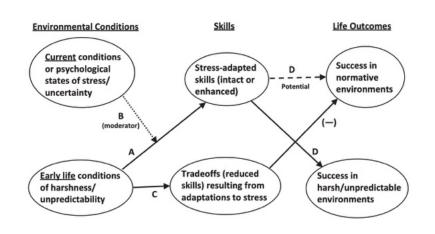






Different types of events have distinct influences on development

- Harm imposed by others = threat
- Insufficient environment = deprivation



The question –

Can stress-adapted skills that enable individuals to function in harsh/unpredictable environments be leveraged to promote success in normative contexts (dashed line), such as schools and work places?

Hidden Talents Model - Ellis, B. et al 2023 https://doi.org/10.1017/9781009350051

- A. Specialisation hypothesis (Frankenhuis & de Weerth, 2013)
- B. Sensitization hypothesis (Ellis et al., 2017)
- C. Costs of adaptation

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Hidden talents framework Ellis, B. et al 2023 https://doi.org/10.1017/9781009350051

Adaptive:

- The effect of a trait on biological fitness (survival and reproduction)
- Does not imply that a trait is socially desirable
- · Adaptations have fitness costs and benefits
 - Adaptive if benefits outweigh costs e.g. vigilance in a high-risk env.

Deficit-based approaches

 Incomplete because they critically miss the social and cognitive skills that develop in response to adversity (Ellis, Bianchi, Griskevicius, & Frankenhuis, 2017; Frankenhuis & de Weerth, 2013)

Published in final edited form as: J Clin Child Adolesc Psychol. 2017; 46(3): 303–330. doi:10.1080/15374416.2016.1220309.

Evidence Base Update for Psychosocial Treatments for Children and Adolescents Exposed to Traumatic Events

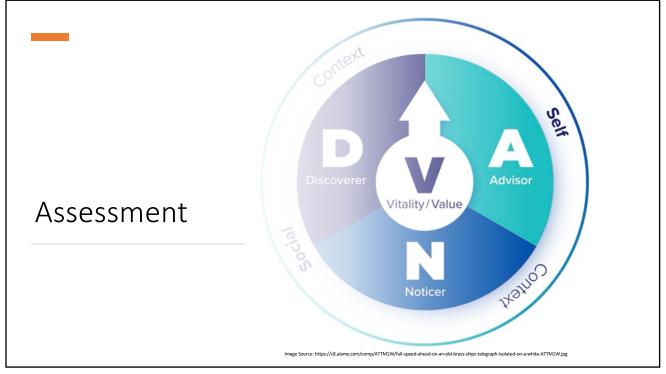
Evidence interventions:

CBT currently has the most evidence – well-established EMDR – probably efficacious Individual integrated for complex T - possibly efficacious

play therapy, individual mind—body skills, and individual psychoanalysis — *experimental*

group creative expressive + CBT was deemed *questionable efficacy* * meditation rarely measured in this review

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Protective factors

- 1. Caregiver support (social)
- 2. Sensitivity to reward (Discoverer)
- 3. Relation to their Self using all DNA-v)

Child trauma exposure and psychopathology: mechanisms of risk and resilience

Katie AMsLaughlin © - Hilary K Lambert

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Mechanisms

- 1. Information processing biases that facilitate rapid identification of environmental threats (Advisor)
- 2. Disruptions in learning mechanisms underlying the acquisition of fear (Noticer+Advisor)
- 3. Heightened emotional responses to potential threats (Noticer)
- 4. Difficulty disengaging from negative emotional content (Discoverer)

Child trauma exposure and psychopathology: mechanisms of risk and resilience

KatieAMcLaughlin ≅-Hilary.KLambert

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Assessment

- Consider in context of what has been lost age, milestones, relationships
- Assess with open-ended questions "Has anything stressful, sad, or scary happened to you or your child?"
- Screen using ACE screener
- Screen for psych flex such as PBAT (see later slides)
- Red-flag presentations of suicidality, self-injurious behavior, or psychosis
- · Associated with
 - disordered eating, sleep disorders, elimination concerns, developmental delay
- Assess comorbidities depression, anxiety, and substance abuse, neurodiversity

Goddard, A. (2021). Adverse Childhood Experiences and Trauma-Informed Care. Journal of Pediatric Health Care: Official Publication of National Association of Pediatric Nurse Associates & Practitioners, 35(2), 145–155. https://doi.org/10.1016/j.pedhc.2020.09.001

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Neurodivergence

Autism – a significant proportion likely to have trauma. In this review up to 17% of young people – up to 40% (Rumball, 2019, Rumball at al 2020)

ADHD – a greater proportion of adults with ADHD will report childhood trauma exposure (Konstenius et al 2017)

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Assessment of DNA-V concerns

Discoverer – impulsivity, externalising behaviours, self-harm, risk

Noticer – triggered reactivity, emotional hyperarousal, low awareness of embodied experience, controlling inner sensations

Advisor – rigid cognitions, fixed rules, attempts to navigate with thoughts rather than feelings, blame and judgement on self and others

Values – low motivation, weaker learning experiences of the language of values

Self - shame, critical/abusive labelling

Social – ruptured relationships, low trust, low vulnerability,

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Your four abilities

- valuer what matters to you
- advisor what you tell yourself
- noticer what you notice inside and outside
- discoverer what you do

1. Motivate

- 2. Explore
- 3. Create words
- 4. Practice



- 1. Accept what thoughts are for
- 2. Decide helpfulness
- 3. Unhook if stuck
- 4. Create new rules

1. Track current actions

- 2. Use strengths
- 3. Explore vitality
- 4. Evaluate by tracking

1. Accept being human

- 2. Undermine control
- 3. Teach coping skills
- 4. Practice it
- 5. Be kind to self and others

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Keeping the foundation steps simple for young adults

Valuer

Put your energy into vital moments and valued action

Discover

- 1. Explore yearning
- 2. Take one bold step
- 3. Stay open to feedback

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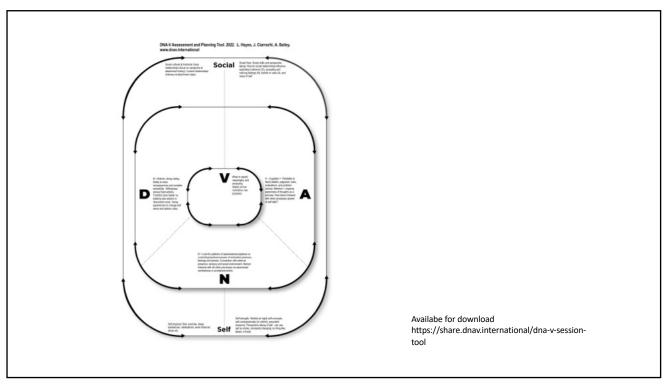
Advisor

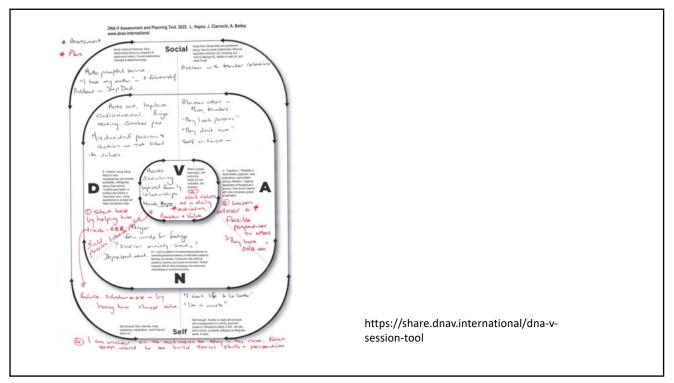
- 1. See it
- 2. Redirect it (don't resist)
- 3. Rule it (with rules-of-thumb)

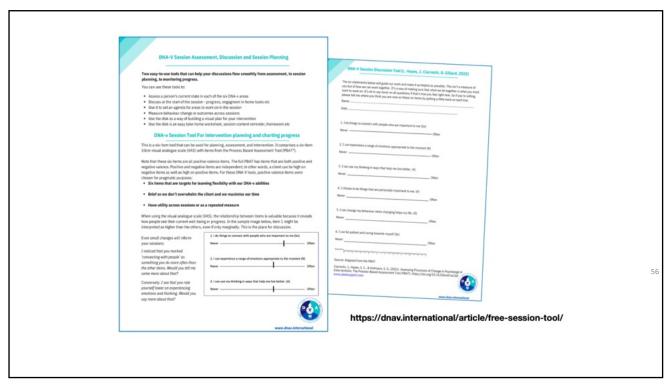
Noticer

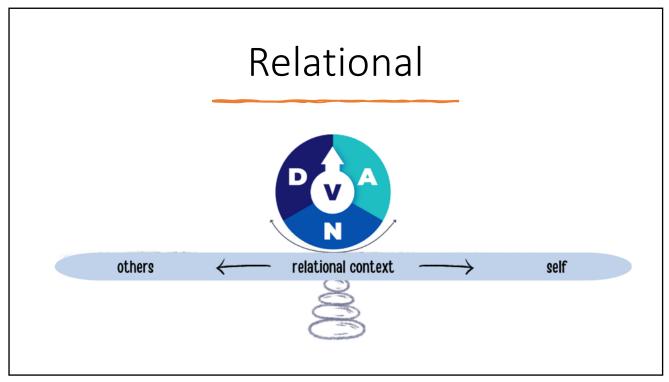
- 1. Noticing inside
- 2. Noticing outside

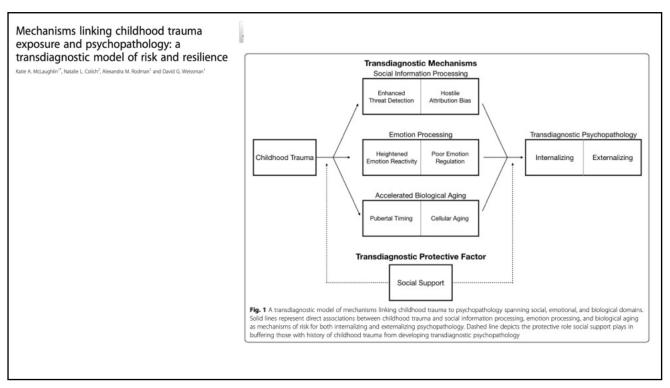
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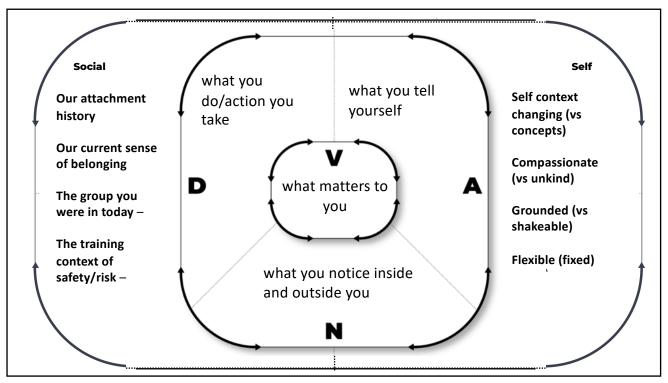


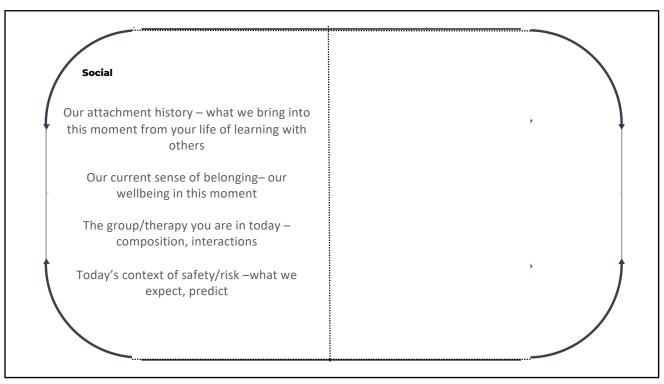


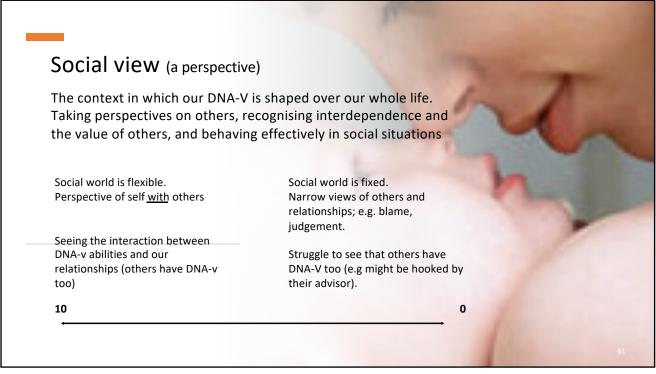












Psychological Flexibility with young people in the community

- Outcomes in the first iteration of the programme (in spite of the C-19 pandemic):
 - The team has worked with approx. 400 care experienced young people to date.
 - 71% YP accessed EET (Education, Employment, Training)
 - 18% shift from NEET to EET. (NEET Not in Education, Employment or Training)
 - 33% had a qualification lower than a Level 1 as their highest qualification when the project started.
 - 81% had a qualification that was Level 1 or higher by the end.
- Reboot 2.0
 - Reboot is working on the biggest and most robust impact trial ever in the UK.
 - The RCT will involve 565 care-experiencing young people aged between 16 − 25 across the southwest region of the UK
 - Using DNA-V



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Attunement in the therapeutic relationship

- Operates from bottom up
- Predicted from three action-oriented responses listening, understanding, and validating (LUV)
- It is not the activity that promotes self-regulation, but the activity in the context of the relationship

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Deep safety

- Trauma is relational
 - A now that vibrates with softness and attentiveness can heal
- Privilege, the young person's needs
- Construct a timeline to consider development and times of distress
- The past is not what happened in the past, but I continuous flow into the current moment, the last five minutes, the last few hours

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Critical micro moments

- Attending to non-verbal queues, eye, contact, vocalisations, facial expressions, tone of voice, breathing rate
- The therapist is a witness, accepting what the individual expresses
- Creates the context for new adaptive responses



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Avoid re-traumatisation

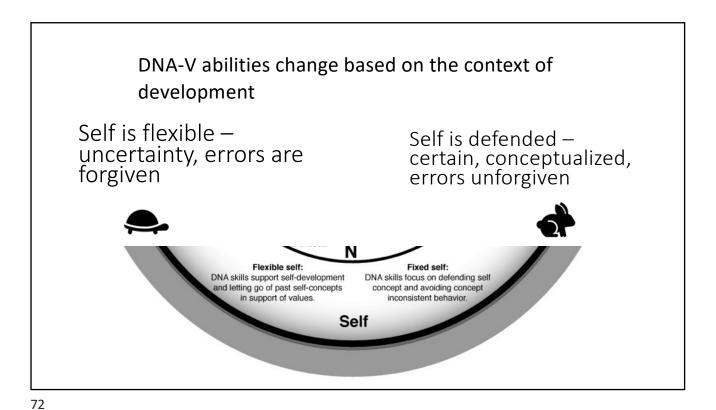
- Educate other professionals, teachers, etc
- Be aware of context triggers
 - · Clinical type office
 - Undressing for sports, hospital settings
 - Noises, sensations, fear responses
 - · Perceived lack of control
 - Lots of service providers
 - Promising and then leaving

Goddard, A. (2021). Adverse Childhood Experiences and Trauma-Informed Care. Journal of Pediatric Health Care: Official Publication of National Association of Pediatric Nurse Associates & Practitioners, 35(2), 145–155. https://doi.org/10.1016/j.pedhc.2020.09.001

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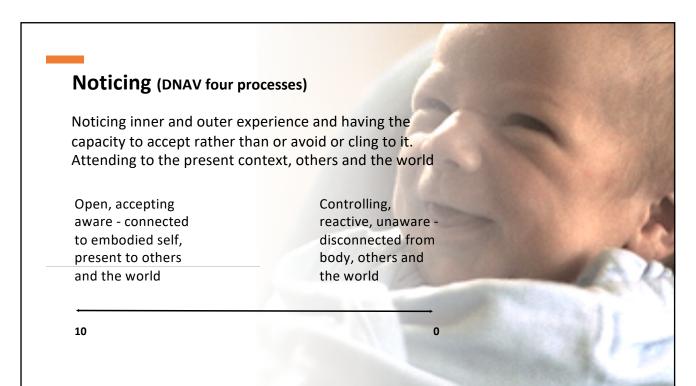


Noticer — navigating through senses/interception/neuroception*

• Advantages:
• Sensitive to body
• Sensitive to environment
• Variability in inner experience, emotions, and responses

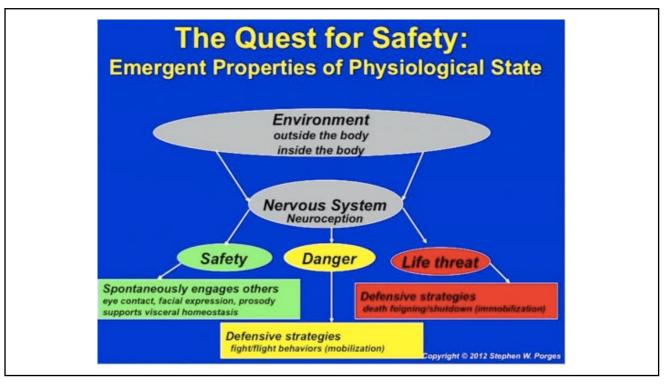
• Costs:
• Hypersensitivity to threat cues

* Porges term for ability to detect cues without conscious awareness



Using DNA-v within the evidence-base

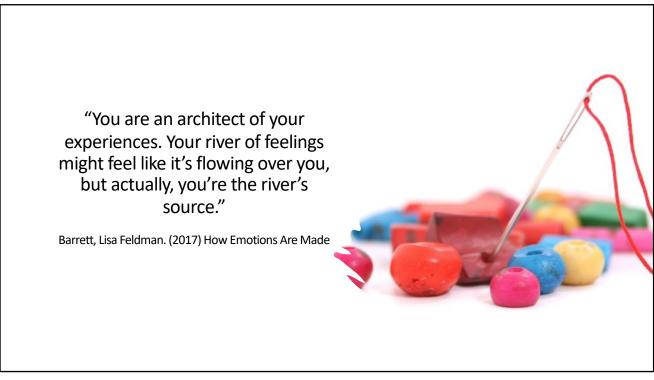
Noticer expand emotional repertoire with — imaginal and in vivo exposure change emotion reactivity with experiential practices increase emotion awareness and repertoire





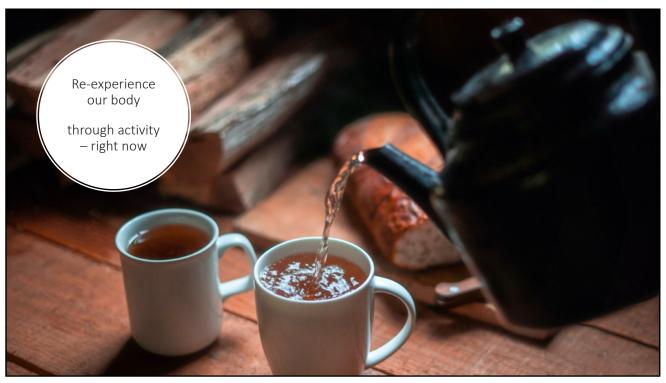












Evidence-based processes - emotion

*Best outcomes for young people include these two:

- 1. acceptance
 - Thoughts
 - Feelings
 - Acting on urges
- 2. Setting goals, session work, reviews and feedback
 - Developing a collaborative working approach
 - · Tracking sessions and doing it together

*Meta-analytic review on adolescent emotion intervention elements (Helland et al 2022).

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Evidence-based processes - emotions

- Weaker* effects for young people from:
 - Social and communication skills training
 - $\bullet \quad \hbox{Differentiation of emotion*}\\$
 - Identifying feelings*
 - Completing mood scales
 - Behavioural activation
 - · Slow breathing
 - Psychoed about: diagnosis, emotion dysregulation, PTSD
 - Problem-solving skills and discussing self-control

*Meta-analytic review on adolescent emotion intervention elements (Helland et al 2022).

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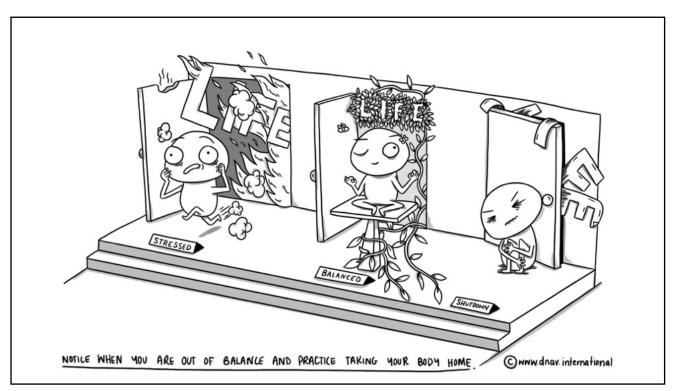
Evidence-based processes - emotions

- * Youth report greater difficulty in labelling and describing their emotions as they age from childhood to adolescence (Haas et al., 2019; Weissman et al., 2020).
 - Children and adults appear better at identifying.
 - Adolescents struggle to differentiate, possibly due to newly coexperienced emotions - i.e. newness and overlapping arising

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Stressed	Balanced	Shutdown
 Your heart races, you feel breathless or edgy You often experience strong emotions. You can be quick to get angry, argue, or feel a need to defend yourself. You can overthink and ruminate on issues. You become agitated over things that don't seem to bother others. You get agitated in a noisy or rushed environment. 	 You have the energy to address life's challenges. There is room for growth. You care for yourself by being grounded, mindful, or nurturing, or have strategies to soothe yourself. You can problem solve, talk helpfully to yourself, and work your way around a problem. You take action that is curious and playful in life. You connect with others by seeking support and asking for help. You restore calmness and strength by being with others. 	1. You feel overwhelmed, ashamed, hopeless, trapped, depressed, or numb. 2. You feel unmotivated and uninterested in doing things. 3. You feel as if you are outside yourself or disconnected. 4. You shut down, go into yourself, and withdraw from others. 5. You are on your guard, expecting betrayal or threat. 6. You are living with abuse, violence, or an unpredictable environment.

Step 1: Evaluate Your Responses

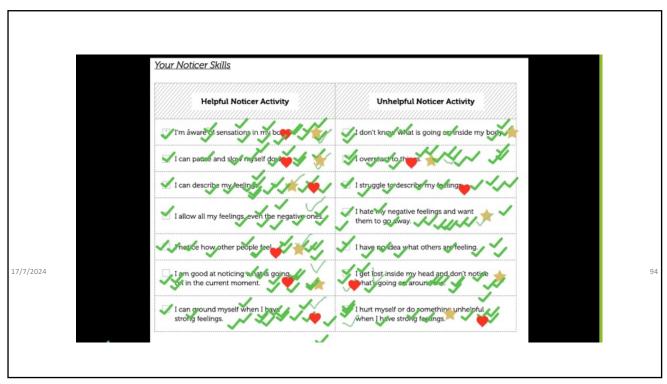
Step 2: Restore Balance
call on your basic noticer - Inside/Outside
practice slowing down
restore your biological system with sleep, diet, and
exercise

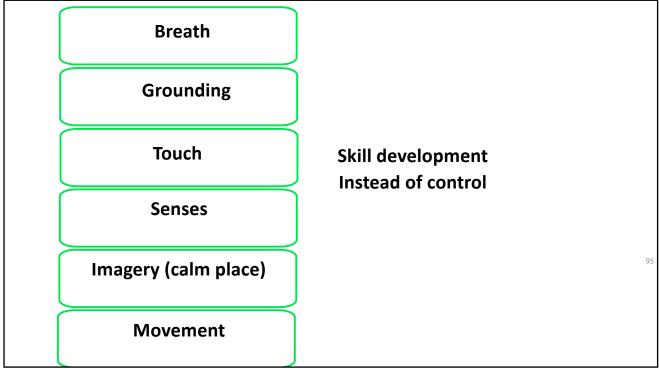
Step 3: Reach Out for Help and Connection

The situation What you did What happened next Did it work out? (make life more meaningful) Context & antecedent (trigger) behaviour of interest Consequence (payoff) value

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<u>Your No</u>	oticer Skills
Helpful Noticer Activity	Unhelpful Noticer Activity
☐ I'm aware of sensations in my body.	I don't know what is going on inside my body.
I can pause and slow myself down.	☐ I overreact to things.
I can describe my feelings.	I struggle to describe my feelings.
I allow all my feelings, even the negative ones.	I hate my negative feelings and want them to go away.
☐ I notice how other people feel.	☐ I have no idea what others are feeling.
I am good at noticing what is going on in the current moment.	I get lost inside my head and don't notice what's going on around me.
I can ground myself when I have strong feelings.	I hurt myself or do something unhelpful when I have strong feelings.





Movement – anything from walking to exercise

Music – listening, playing, rhythm, podcast making



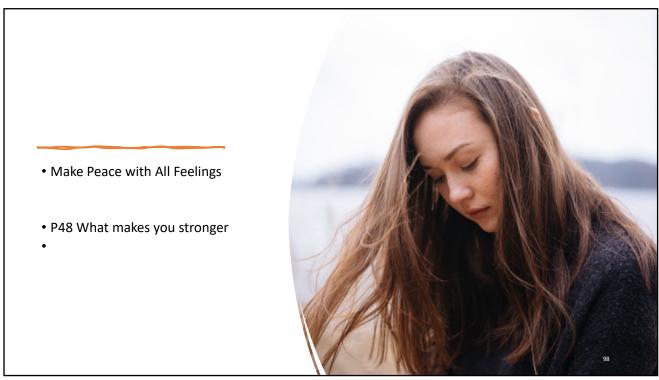
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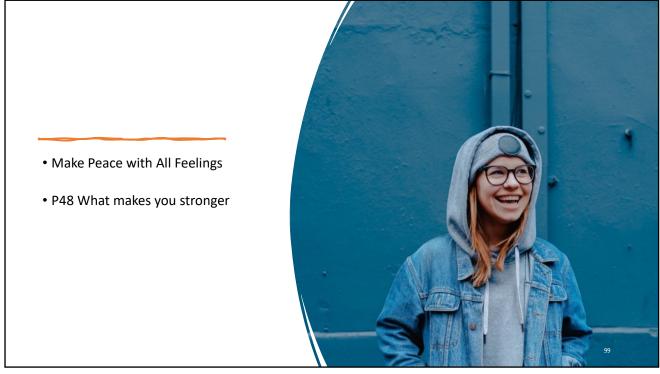
EMDR

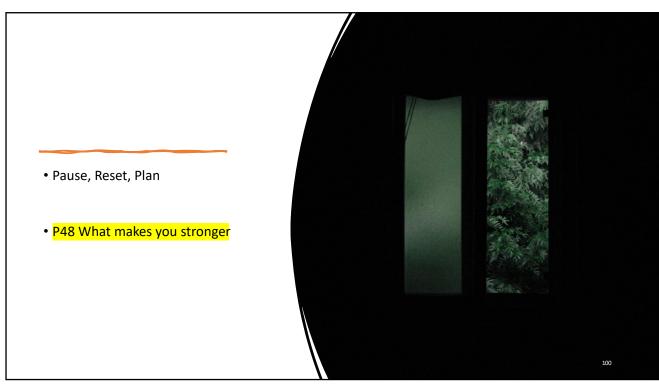
- Eye movement
- Bilateral stimulation
 - For trauma memories

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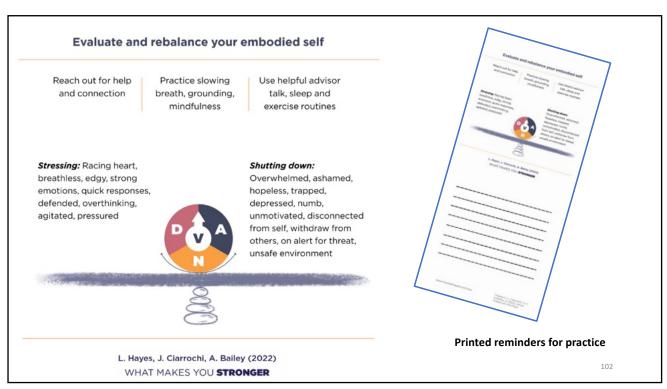
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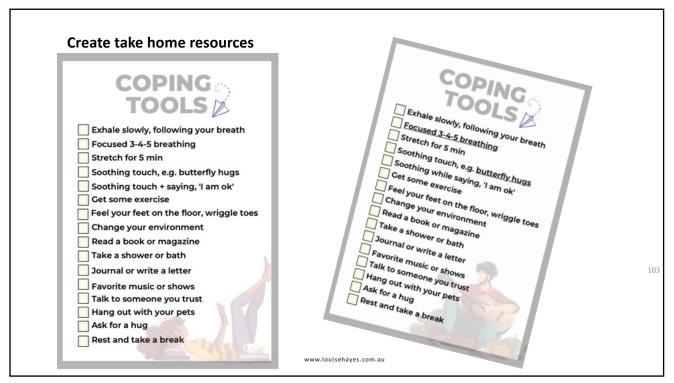


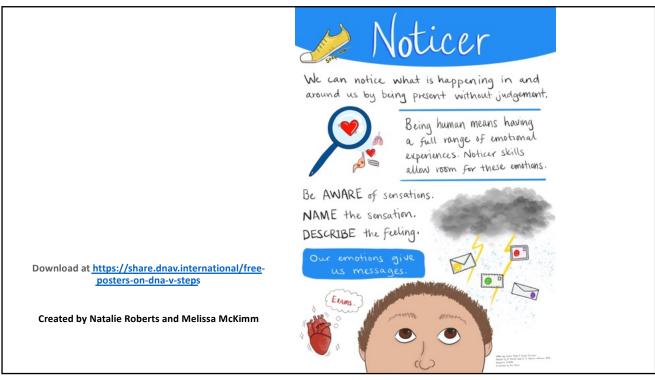


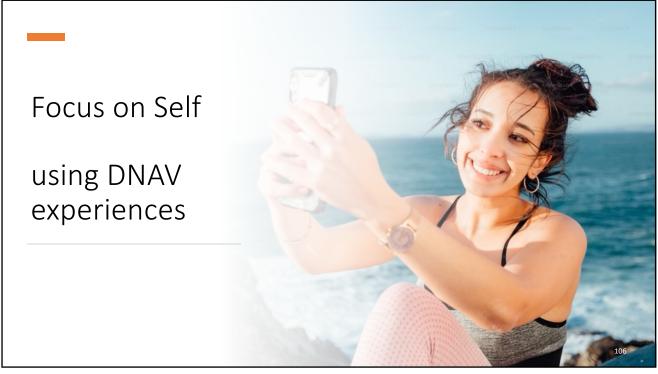


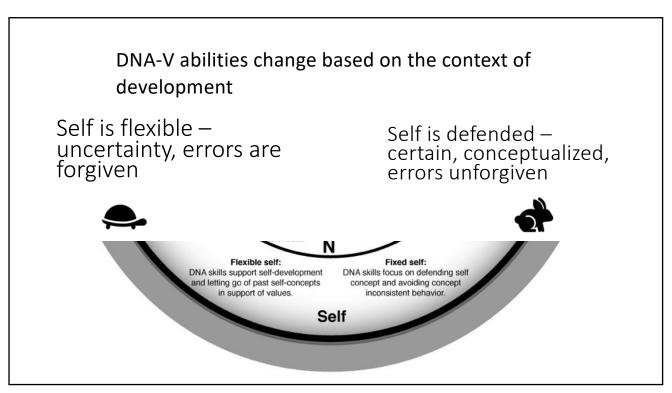


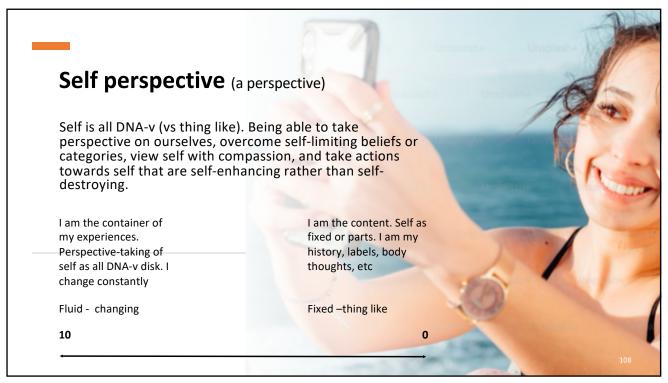


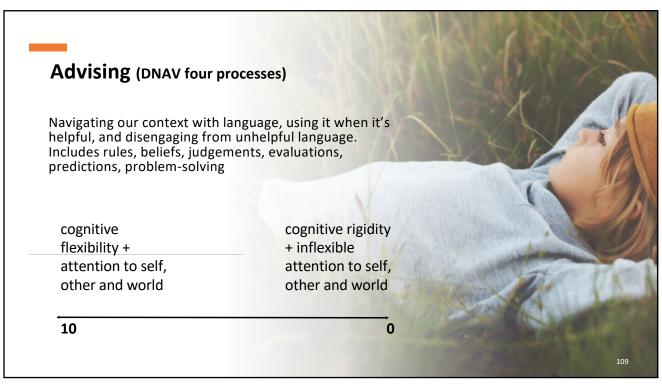












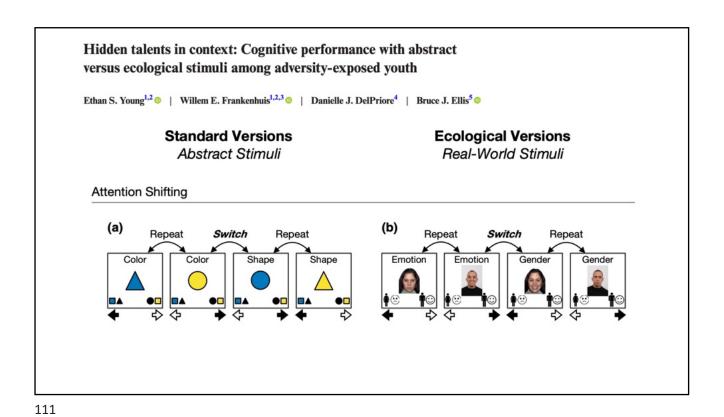
Advisor – navigating with language



- Advantages:
 - Fast guide to action
 - Use language for prediction, avoids the need for trial and error
 - · Not dependent on direct experience
- · Costs:
 - · Content 'words' become fixed
 - · Reduced variability can limit growth
 - Reduced selection based on environmental consequences
 - Concrete rather than arbitrary







Using DNA-v within the evidence-base



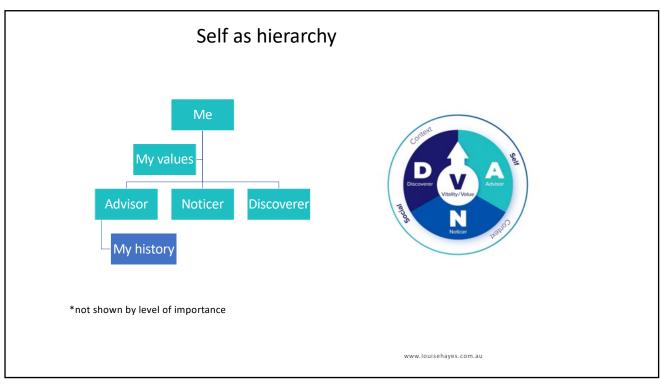
Advisor

Address information processing bias by experientially testing and taking new perspectives

Include cognitive coping techniques

Create new rules, and test them

Shift into D, N or V whenever needed/stuck



Young people and development

- 1. Developing identity hierarchy of self
- 2. Tracking depends on the history of mapping actions to consequences
- 3. Value depends on the history of verbal community mapping actions to longer-term outcomes

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Conceptual self

Trauma associated with negative cognitions and predictions

Participants asked to read a sentence and predict the ending

- Ambiguous sentence stems that ended either with a:
 - positive final word things will turn out . . . Fine
 - negative final word things will turn out . . . Badly
- People with trauma had more negative predictions about the future

Kimble, M., Sripad, A., Fowler, R., Sobolewski, S., & Fleming, K. (2018). Negative world views after trauma: Neurophysiological evidence for negative expectancies. Psychological Trauma: Theory, Research, Practice and Policy, 10(5), 576–584. https://doi.org/10.1037/tra0000324

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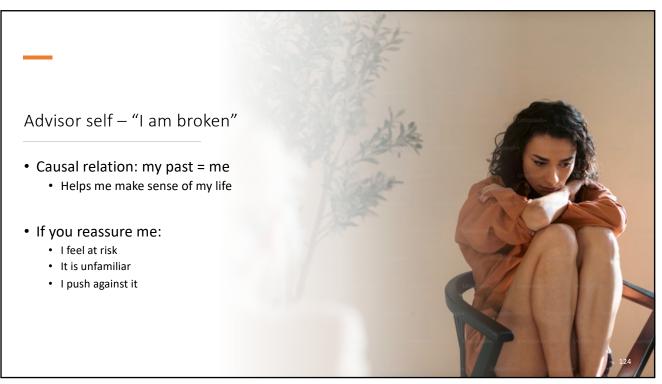


Look for language coherence

shake it up experientially:

find MORE than ... different to...



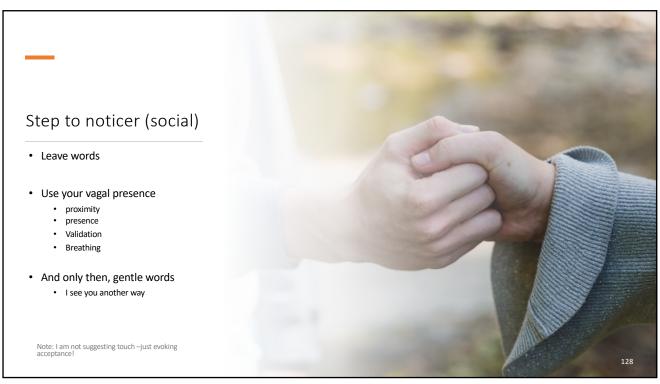


Why self-rules are reinforcing and why reassurance can go terribly wrong Legend - \cong is equivalent to, \Rightarrow is caused by, ≠ does not equal, \subseteq is part of Statement that follows "I Potential verbal rule Consequences of Reassuring Statements = Young am broken...." person seeks coherence to their rulebroken helps me make My self concept \cong is true When you reassure you're confusing me, or you are sense of my life (equivalence) taking me beyond what I know, therefore: Hold tighter to rule helps because if I try to do Self-concept ⇒ screw up (causal) When you reassure you are telling me to put myself something right, I'll just mess at risk, therefore: it up, and then I'll hate Hold tighter to rule myself for tryingyou want me to be You are trying to control me, therefore: My self-concept ≠ Your idea of me different (distinction) Counterpliance – I'll do opposite of what you wantX made me this way. The You are trying to excuse people who treat me badly, My self-concept \Rightarrow Is their fault worse I am, the more X is to (causal) therefore: blame Counterpliance – I'll do the opposite of what you

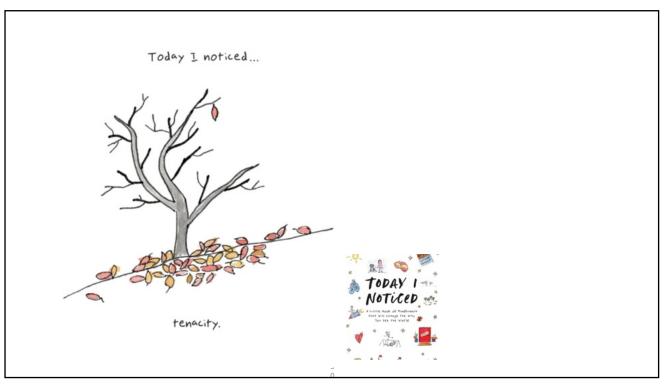
Source: The thriving adolescent (2015)

Legend - ≅ is equivalent to, ⇒ is caused by, ≠ does not equal, ⊆ is part of			
Statement that follows "I am broken"	Potential verbal rule	Consequences of Reassuring Statements = Young person seeks coherence to their rule	
please tell me I'm not	(equivalence)	You need to keep reassuring me so I feel better, because: History of reassurance was reinforcing	
because I am inherently bad, I could not help myself	My self-concept ⊆ Part of who I really am (hierarchy)	You are saying I am to blame for the past, therefore Hold tighter to rule	
if I am cruel to myself, it will make me do better	, ,	You are trying to take away my motivation, bad things may follow, therefore Hold tighter to rule	
it is consistent with the evidence of my whole life	My self-concept ⊆ Is part of my history (hierarchy)	There is plenty of evidence that I am a screw up, therefore Hold tighter to rule	
X made me who I am	My self-concept ⊆ What X thinks (hierarchy)	They are an authority figure, therefore must be rig Hold tighter to rule	









Step to discovery • Experience the world around you • Let that experience retrain your advisor – 'I am more than....' • I have this history, AND, I can.....



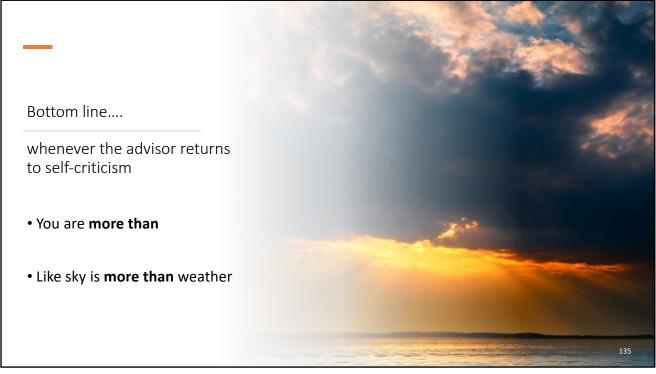


Use words/thoughts in new and different ways

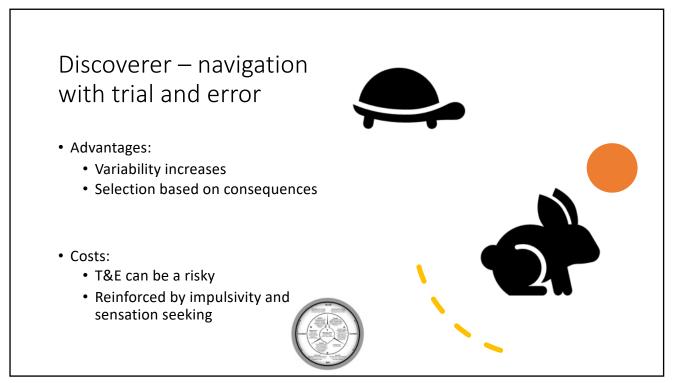
- Canva
- Art
- Images
- Games
- Journals
- Word clouds

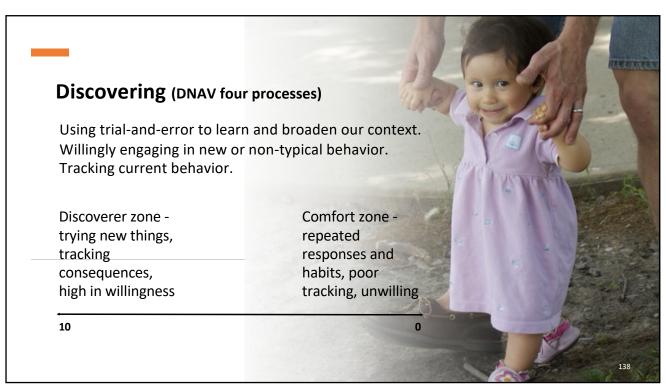


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Using DNA-v within the evidence-base

Discoverer no tests on whether behavioural activation works

Building your strengths

- Reclaim your survival strength
- Reframe it as a helpful resource
- Use it for vitality and value

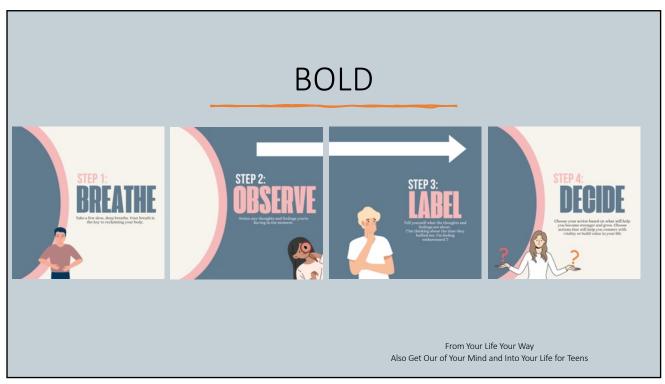


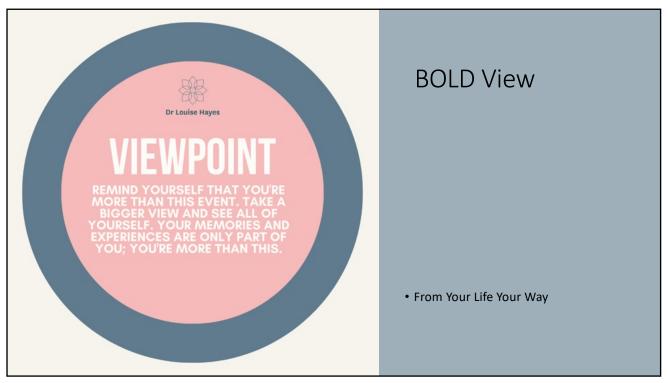
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Card sorts, quizzes and

++
reverse
engineering –
how did you do
that?





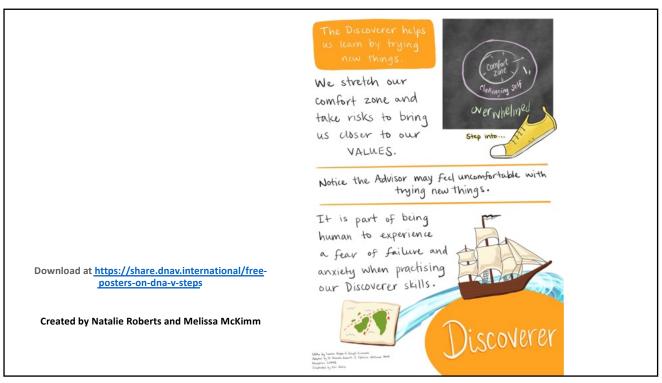


Get creative

- Movement
- Music
- Sport



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Using DNA-v within the evidence-base

Value

Very limited research on post-traumatic growth, values, motivation

Value and vitality - retention

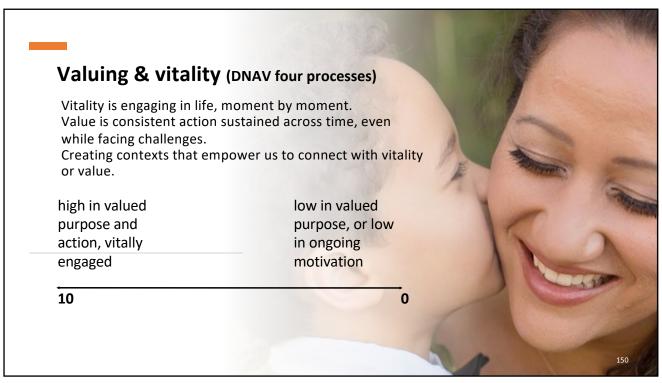
 Verbal behavior that can transform experience and help us move beyond immediate reinforcement

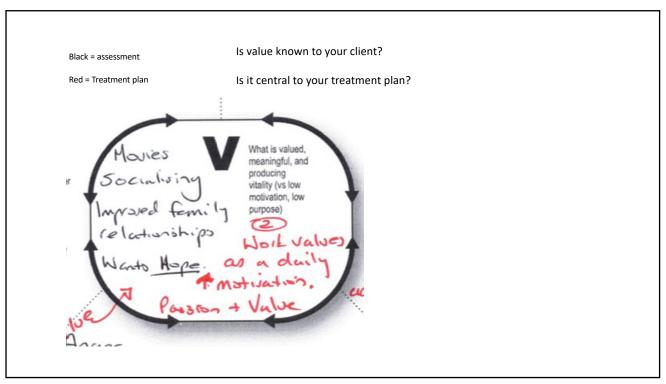


- Select for behaviour that optimises growth
- Values define the consequences that, ideally, would select a particular behaviour in a particular environment



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Links to resources and more learning

Training

https://learn.louisehayes.com.au/resources

Free course on assessment and treatment planning

Low cost on demand courses

Resources

Dozens of free worksheets etc

https://dnav.international/downloads/

Links to assessment and planning tools

PBAT - All information is freely available on:

https://pbatsupport.com/

DNA-V - Session discussion tool

DNA-V - Case conceptualisation and intervention worksheet

https://learn.louisehayes.com.au/resources

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References

Barrett, L. F. (2017). How emotions are made: The secret life of the brain. Houghton Mifflin Harcourt.

Ciarrochi, J., Hayes, S. C., Oades, L. G., & Hofmann, S. G. (2021). Toward a Unified Framework for Positive Psychology Interventions: Evidence-Based Processes of Change in Coaching, Prevention, and Training. Frontiers in Psychology, 12, 809362.

Ciarrochi, J., Sahdra, B., Hofmann, S. G., & Hayes, S. C. (2022). Developing an item pool to assess processes of change in psychological interventions: The Process-Based Assessment Tool (PBAT). Journal of Contextual Behavioral Science, 23, 200-213.

Ciarrochi, J. V., & Hayes, L. L. (2020). Your Life, Your Way: Acceptance and Commitment Therapy Skills to Help Teens Manage Emotions and Build Resilience. New Harbinger Publications

Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., Koss, M. P., & Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading auses of death in adults. The Adverse Childhood Experiences (ACE) Study. American Journal of Preventive Medicine, 14(4), 245–258, h

Goddard, A. (2021). Adverse Childhood Experiences and Trauma-Informed Care. Journal of Pediatric Health Care: Official Publication of National Association of Pediatric Nurse Associates & Practitioners, 35(2), 145–155. https://doi.org/10.1016/j.pedhc.2020.09.001 Hayes, L. L., & Ciarrochi, J. V. (2015). The Thriving Adolescent: Using Acceptance and Commitment Therapy and Positive Psychology to Help Teens Manage Emotions, Achieve Goals, and Build Connection. New Harbinger Publications.

Helland, S. S., Mellblom, A. V., Kjøbli, J., Wentzel-Larsen, T., Espenes, K., Engell, T., & Kirkøen, B. (2022). Elements in Mental Health Interventions Associated with Effects on Emotion Regulation in Adolescents: A Meta-Analysis. Administration and Policy in Mental Health, 49(6), 1004–1018.

Howard, J., L'Estrange, L., & Brown, M. (2022). National Guidelines for Trauma-Aware Education in Australia. Frontiers in Education, 7, Article number: 826658. https://eprints.gut.edu.au/232311

Hughes, K., Bellis, M. A., Hardcastle, K. A., Sethi, D., Butchart, A., Mikton, C., Jones, L., & Dunne, M. P. (2017). The effect of multiple adverse childhood experiences on health: a systematic review and meta-analysis. The Lancet. Public Health, 2(8), e356-e366. htt

Nook, E. C., Flournoy, J. C., Rodman, A. M., Mair, P., & McLaughlin, K. A. (2021). High emotion differentiation buffers against internalizing symptoms following exposure to stressful life events in adolescence: An intensive longitudinal study. Clinical Psychological Science, 9(4), 699–718.

Porges, S. W. (2011). The Polyvagal Theory: Neurophysiological Foundations of Emotions, Attachment, Communication, and Self-regulation (Norton Series on Interpersonal Neurobiology). W. W. Norton &

174

References

Rumball, F. (2019). A Systematic Review of the Assessment and Treatment of Posttraumatic Stress Disorder in Individuals with Autism Spectrum Disorders. Review Journal of Autism and Developmental Disorders, 6(3), 294–324. https://doi.org/10.1007/s40489-018-0133-9

Konstenius, M., Leifman, A., van Emmerik-van Oortmerssen, K., van de Glind, G., Franck, J., Moggi, F., Ramos-Quiroga, J. A., Levin, F. R., Carpentier, P. J., Skutle, A., Bu, E.-T., Kaye, S., Demetrovics, Z., Barta, C., Auriecomb, M., Fatséas, M., Johnson, B., Faraone, S. V., Allsop, S., ... van den Brink, W. (2017). Childhood trauma exposure in substance use disorder patients with and without ADHD. Addictive Behaviors, 65, 118–124. https://doi.org/10.1016/j.addbeh.2016.10.016

Howard, J., L'Estrange, L., & Brown, M. (2022). National Guidelines for Trauma-Aware Education in Australia. Frontiers in Education, 7, Article number: 826658. https://eorints.gut.edu.au/232311

Maynard, B. R., Farina, A., Dell, N. A., & Kelly, M. S. (2019). Effects of trauma-informed approaches in schools: A systematic review. Campbell Systematic Reviews, 15(1-2). https://doi.org/10.1002/ci2.1018

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