

ASCA Champions Trauma Informed Care Agenda

The increased focus and investment federally around mental health this year is most welcome. However trauma, in general, and complex trauma in particular have not featured within this mental health policy reform.

This was highlighted recently when the Federal government issued its 10 year roadmap for mental health reform, the ASCA response to which can be accessed by [clicking here](#)

When trauma is identified it is often understood in terms of single incident trauma, and viewed as exceptional, applicable only to the person or group directly experiencing it. Current responses are often based on this limited perception.

Expanding research indicates the need for a different treatment path for complex as opposed to single incident trauma.

Complex trauma is more prevalent in our society than most people would imagine. Its impacts are a major national public health problem and need to be urgently addressed.

We are delighted to announce that ASCA has undertaken critical work in this area and has engaged Dr. Pam Stavropoulos, an experienced researcher, educator and clinician to develop a set of Best Practice Guidelines for addressing complex trauma.

This work funded by DoHA (Federal Department of Health and Ageing) will additionally incorporate emerging best practice

guidelines around Trauma informed Care and Practice.

ASCA has been instrumental in championing a national trauma informed care and practice agenda with its foundation partners: MHCC (Mental Health Coordinating Council), ECAV (Education Centre against Violence) and PMHCCN (Private Mental Health Carer and Consumer Network).

It is continuing this work with an expanded panel of stakeholders on the newly formed AWG (Advisory Working Group) around TICP (Trauma Informed Care and Practice) under the stewardship of MHCC.

ASCA's guidelines will serve as a foundation for a trauma-informed approach to care for services generally and trauma specific services for Australian adult survivors of child abuse, many of whom have complex needs.

The initial draft of these guidelines was completed at the end of the 2011. The draft is currently undergoing review by internal stakeholders before being reviewed by a diversity of external stakeholders and the ASCA Board.

It is envisaged that the final document "The Last Frontier – Emerging Best Practice Guidelines for Complex trauma (trauma-specific) and Trauma informed Care and Practice will be released in the first half of 2012.

This work will form a basis for future service

responses for individuals who have experienced the cumulative and compounded impacts of interpersonal traumas of childhood as per the quote below...

"Identifying complex trauma as a distinct subset of psychological traumas provides the clinician and researcher with a basis for identifying individuals who have experienced not only the shock of extreme fear, helplessness, and horror but also disruption of the emergent capacity for psychobiological self-regulation and secure attachment. In addition to hyperarousal and hypervigilance in relation to external danger, complex trauma poses for the person the internal threat of being unable to self-regulate, self-organize, or draw upon relationships to regain self-integrity." (Courtois & Ford, 2009:17)



Page 3: we include a short bio from Pam and an overview of her work.

Welcome

to the 2012 Autumn edition of ASCA's e-Health.

In our last edition we featured ASCA's work and that of its collaborating partners in driving a national agenda around Trauma Informed Care and Practice. In this edition we highlight the important role ASCA is taking in championing the needs of those who have experienced complex trauma secondary to child abuse and neglect.

Pam Stavropoulos talks about the crucial research she has undertaken on behalf of ASCA in developing Best Practice Guidelines around both complex trauma and Trauma informed Care and Practice, bringing the two-pronged approach ASCA is embracing into focus.

We also take the opportunity to apprise you of developments within ASCA in key personnel as well as to introduce you to a number of new members of our Advisory Panel.

We welcome them along with existing members and thank them for their expert involvement as ASCA builds its expertise

both externally and internally around informed responsiveness to complex trauma and a trauma informed approach to care.

We are thrilled to include an introductory message from Dr. David Leonard, AM, who joined our panel late last year and whose biography was featured in our last edition of e-health.

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Changes To Key ASCA Personnel

PRESIDENT | Dr Cathy Kezelman



The ASCA board recently bestowed the title of ASCA President on Dr. Cathy Kezelman, a current director who also holds the voluntary position of Head of Stakeholder Relations.

Cathy has held leadership roles with ASCA for a decade including 2 terms as Chairperson.

"As the current Chairman of ASCA it gives me great pleasure to announce that the Board of ASCA unanimously agreed to appoint Cathy Kezelman as our President with immediate effect.

Appointing Cathy as our President recognises and acknowledges her profound contribution to ASCA over the last 10 years as well as acknowledging the work Cathy is currently doing with our external stakeholders, particularly Government, to place ASCA as the pre-eminent organisation dealing with the needs of Adult Survivors of Child Abuse.

Her work in elevating the issue of trauma informed care and the mental health aspects of child abuse survivors is absolutely critical in getting the issues on the Federal and State Government agendas.

The Board was delighted to acknowledge Cathy in this way and I'm sure that you will all join me in congratulating Cathy."

John Teer, ASCA Chair

NEW COO | Margaret Price



ASCA is pleased to welcome new COO (Chief Operating Officer) to ASCA, Margaret Price.

Margaret has experience working in a varied range of industries such as media (print, online, exhibitions), public education, marine, health, retail, IT, consumer and B2B products where she has built extensive skills across strategy, marketing, customer service and office management.

Margaret has a Bachelor of Business Studies from UTS (Majoring in Marketing) and a Grad. Cert. in Counselling (ACAP - Aust. College Applied Psychology) and is currently studying her Masters in Coaching Psychology at Sydney University.

In recent years Margaret has developed a passion for working with not-for-profit organisations and the positive difference they can effect in the wider community. More particularly, she is delighted to be contributing to the es-

UPCOMING WORKSHOPS Health Care Professionals & 'Creating New Possibilities' for Survivors

← See Page 8

ASCA will be running six Health Professional Workshops around the country (in May and June) to provide Health Professionals with knowledge, skills and guidelines for working with adults abused, neglected or otherwise traumatised as children. These workshops have been endorsed by APS (7 CPD hours), AASW (14 points) and **ACMHN** (7 ACMHN CPE Points). For more information about these and upcoming survivors workshops and to register go to www.asca.org.au/workshops

The Last Frontier?

Emerging Best Practice Guidelines for Complex Trauma (trauma-specific) and Trauma-Informed Care and Practice

by Dr. Pam Stavropoulos

The recently completed draft of Emerging Best Practice Guidelines for Complex Trauma (trauma-specific) and Trauma-Informed care and practice is now undergoing internal review. As those who work with and advocate for adult survivors of child abuse are well aware, existing trauma treatment guidelines focus on *single-incident* trauma, and are inadequate to address the comprehensive and cumulative effects of complex trauma varieties.

Drawing on the expanding research base in the neurobiology of attachment, the ASCA guidelines present protocols for addressing the multifaceted syndrome of complex trauma, and represent emerging best practice in this now dynamic field.

Given both the prevalence and widespread lack of understanding of complex trauma, the guidelines also represent an opportunity to bring the pioneering work of ASCA to a much wider audience. Because survivors of

complex trauma are not well served by the current health system – and indeed risk re-traumatisation in their encounters with it – there is also glaring need for widespread introduction of service principles which are *trauma-informed*.

The ASCA guidelines also present protocols for implementation of trauma-informed principles, which in combination with the work of the MHCC in this area, might likewise serve as benchmark standards for Australian service-providers.

Research for the guidelines establishes the strong credentials of ASCA to serve both as the peak national advisory body for complex trauma, and as correspondingly equipped to educate health professionals, governments and the public on the necessity for all service-providers to be trauma-informed.

These dual priorities position ASCA as unique within the landscape of Australian

service-provision, in being able to offer evidence-based programs and advice which is both (complex) trauma-specific *and* trauma-informed.

In contrast to the existing (single-incident) PTSD guidelines, key features of the draft guidelines for complex trauma include: the need for *phased treatment*, the addressing of *implicit memory*, engagement of *right-brain processes*, and attunement to *physical movement and the body* as well as to cognitive and emotional processes.

The guidelines for trauma-informed principles of service-delivery are based on operationalisation of five key values – *safety, trustworthiness, choice, collaboration and empowerment*.

Internal comment on both sets of guidelines will be incorporated into a second draft which will be submitted to selected external stake-holders as the next stage in the feedback process, prior to review by the ASCA board and subsequent publication.



Pam Stavropoulos

Consultant in Clinical Research

PhD in Politics (University of Melbourne, 1989)

Graduate Diploma in Psychotherapy (Jansen Newman Institute, 2001)

Certificate IV in Workplace Training and Assessment (2004)

BA (Hons) University of Melbourne, 1983

A former Fulbright Scholar, Pam has held lectureships at Macquarie University and the University of New England, taught in two Master of Counselling courses, and is a former Program Director of the Jansen Newman Institute. She has written research reports in the community health sector, and was a Senior Research Officer with the Mental Health Association NSW.

Pam is a practising therapist, and a supervisor in the area of complex trauma. Her research interests relate to trauma, depression, and the politics of subjectivity.

She is the author of 'Living under Liberalism: The Politics of Depression in Western Democracies' (Florida: Universal, 2008), co-author of 'Gender Studies: Terms and Debates' (New York: Palgrave, 2003), and has published several book chapters, articles and reviews.

Pam is also the lead author of 'Perceptions and Experiences of Cannabis Use by Young Adults Living with a Mental Illness: A Qualitative Study' a paper based on 'What Works? Report into Cannabis Use by Young Adults Living with a Mental Illness', Partners in Mental Health Publishing Consortium and Social Justice Social Change Research Group, University of Western Sydney, 2010] Australian Social Policy Journal (No.10, 2011), pp.51-69.

ASCA thanks Pam for her excellent work and enthusiasm for our shared vision.

Professor Raphael's Statement for ASCA

Professor Raphael is an internationally recognised expert in mental health aspects of terrorism and disasters and has long-term involvement and experience in research and management in the areas of trauma, grief and disasters. More specifically, her work has covered trauma, loss and other adversities as they affect children and young people, their needs and their families' needs, including school-based research, surveys and programs. She has extensive experience in service provision and policy development in mental health. She is currently Professor of Psychological Medicine at the Australian National University and Professor of Population Mental Health & Disaster at the University of Western Sydney. Professor Raphael is chair of the National Mental Health Disaster Response Committee and Taskforce and a consultant to World Health Organisation.

Below is the statement she wrote for ASCA:

It is widely accepted that children have the right to protection from violence, the security of a loving family environment and opportunities for learning. All families however are complex, and while most do their best to provide these securities, adverse experiences are very common in childhood, affecting more than 1 in 5 children under 15

years of age. There is now a large body of research highlighting the potential consequences of adverse childhood experiences for childhood, adolescence and adult life. Some adversities are reflected by exposure to significant "family life difficulties" such as family conflict, loss of a job, chronic health problems including mental health problems, and family breakdown. While many children will be resilient in the face of such troubles, some will have increased risk of mental health and other health problems in childhood, adolescence and through to adult life.

Most severe, however, are the effects of child abuse, physical, sexual, emotional and neglect. These abuses, particularly sexual and physical abuse, can have very negative effects on the child's development, damaging them in ways which can have profound consequences for their lives, not only in childhood, but also in adult life. People who have been so affected may need extensive and intensive support and care. While there are organisations such as ASCA (Adults Surviving Child Abuse), there are many issues that must be addressed, and incorporated into future services.

The ubiquity of such experience highlights the need for recognition of these potential harms from the earliest stages and the

development of stronger programs to support families and protect children and to prevent abuse, neglect and other adversities.

And to make sure that our systems of care are informed and sensitive to these effects throughout the life span. Health systems generally, and mental health systems specifically, need to take into account the significance of such "trauma" with a commitment to "trauma informed care". Trauma is often characterised as 'single incident trauma' only e.g. trauma of natural disasters or single assaults in adulthood i.e. PTSD with services focussed on responsiveness to PTSD alone.

However developmental trauma experienced by children subjected to childhood abuse, neglect or family violence or other adverse family event is often repeated, extreme and prolonged. Repercussions are often cumulative and responding to 'complex trauma' necessitates different responses. Training and understanding around the complex needs of adults repeatedly traumatised as children will enable adults to build on their inherent strengths towards recovery, and also help improve not only their lives, but that of their children and communities.

"Responding to the needs of consumers with complex trauma histories: a consumer perspective"

A presentation focusing on the needs of adult survivors of child abuse, highlighting the frequent failures of the current system to identify them and respond appropriately. Using her personal journey of recovery from complex trauma at the core of which is childhood abuse, Dr. Cathy Kezelman, ASCA President explores the distinguishing features of complex trauma presentations.

In so doing she stresses the need to respond holistically to each person with full awareness of their lived experience. She highlights the need for the research of the last thirty years to be incorporated into practice with a trauma-informed approach to care bringing better outcomes for consumers with complex trauma histories.

The presentation was given as part of the Inaugural Conference Westmead Psychotherapy Program for Complex Traumatic Disorders Complex Trauma: Psychobiology, Clinical Need and Psychotherapy.

Recorded 10th November 2011, Westmead Hospital NSW. It can be accessed at <http://bit.ly/vccEBp>

An Interview with Dr Kezelman

Source: MHPN News Dec 15 2011

As a publicly declared survivor of child abuse, Dr Cathy Kezelman has had a significant period of time to reflect—and act—on the subject of complex trauma. Dr Cathy Kezelman is a director of Adults Surviving Child Abuse (ASCA).

She is also the author of *Innocence Revisited*, a memoir chronicling her battle with depression and suicidality, at the core of which was childhood trauma.

Dr Kezelman was one of the presenters for a recent Mental Health Professionals Network complex trauma webinar. In a wide ranging conversation, she talked about her passion for reform, and the role MHPN plays in bringing it about.

Dr Kezelman became involved with MHPN in running a webinar around complex trauma because the whole area of trauma in general, and complex trauma in particular, had not received the focus it deserves within mental health reform.

'I really wanted to clarify that there is a significant research base that indicates a need for a different treatment path for complex as opposed to single incident trauma, and that it's important for practitioners to be informed about the presen-

tations of complex trauma, its cumulative impacts and potential long term repercussions.

'What I could bring to the webinar was the lived experience of individuals who have experienced complex trauma, and clarity around the relationship between their needs, their ways of coping, their symptoms, and the underlying trauma.'

Her aim was to enable a greater degree of understanding so practitioners and systems could respond appropriately.

'For me personally, it was an opportunity to speak to a diversity of health professionals about an area which is close to my heart and which I passionately want to champion.

'[It needs] education and greater awareness among health professionals so they will become more trauma-informed and systems will respond with better care ... for those who have suffered repeated interpersonal trauma.'

She described her campaign as a personal response to having worked through her own childhood abuse. She felt privileged that she had been able to access very good private based care with a clinical psychologist who had skilfully collaborated with a psychiatrist and a GP.

'I received coordinated care within the

private sector and that's what the MHPN networks are trying to promote. I'm a case in point. I've been privileged to be able to get that degree of expert care for the period of time for which I needed it.'

She believed it was important to see consumer voices being accepted as a critical part of that process.

'What I'd like to see in the future is that consumer managed organisations also become part of the conversation because they also offer crucial supports for mental health consumers and they really need to be added to the mix.'

Dr Kezelman felt the conversation on complex trauma had now begun. The webinar experience has persuaded her that further online sessions on trauma-informed care and practice were in order.

She felt the principle of care needed around trauma is to move away from a traditional medical model to one which responds holistically to individuals in the context of the lived experience.

'We need as a workforce to understand the particular vulnerabilities and sensitivities of trauma survivors if we are going to respond in a respectful, empathic and collaborative way.'

<http://bit.ly/w87dbj>

Webinar: Mental Health Professionals Network

“Complex Trauma, working together, working better to support adult survivors of childhood abuse”

ASCA President Dr. Cathy Kezelman, psychiatrist Professor Warwick Middleton (member ASCA Advisory Panel), and psychologist Ursula Benstead recently took part in a webinar facilitated by Dr. Michael Murray, GP educator for the Mental Health Professionals Network.

The webinar was booked out and very well received.

It is available on webcast and can be viewed online at the following link address:

<http://www.mhpn.org.au/News/Events/ComplexTrauma.aspx#recording>

ASCA welcomes new members to its Advisory Panel

The experience and knowledge these experts bring in the form of research, practice, and education around complex trauma and trauma informed care will support the work of ASCA in years to come.

We look forward to working with each and every member of the ASCA Advisory Panel in 2012 and beyond in collectively advocating for services which better meet the needs of Australian adults who have experienced childhood trauma.

Martin Dorahy, PhD, DClinPsych

Martin Dorahy is a clinical psychologist and senior lecturer in the Department of Psychology, University of Canterbury. He has a clinical, theoretical and research interest in complex trauma and dissociative disorders, their phenomenology, and cognitive and affective underpinnings.

Martin has published over 60 peer-reviewed journal articles and co-edited two books in the area of psychotraumatology (Traumatic Dissociation: Neurobiology and Treatment, 2007, American Psychiatric Publishing, Inc; Psycho-sis, Trauma and Dissociation: Emerging Perspectives on Severe Psychopathology, 2008, Wiley Press).

He is on the Research Advisor Panel of the Cannan Institute, Chair of the International Society for the Study of Trauma and Dissociation's David Caul Graduate Research Award and Co-editor (with Onno van der Hart, PhD) of the European Society for Trauma and Dissociation's Newsletter.

Along with his academic and research work, Martin maintains a clinical practice focused primarily on the adult sequelae of childhood relational trauma.

Dr Jan Ewing PhD, MCP

Dr Ewing has a Masters degree in Clinical Psychology from the University of Melbourne and a Ph.D in Clinical Neuropsychology from the University of Victoria, British Columbia, Canada. She is a member of the APS College of Clinical Psychologists and a founding member of the College of Clinical Neuropsychologists.

Dr Ewing is also a founding member and Fellow of the Australian Society for the Study of Brain Impairment and a member of numer-

ous other national and international societies, including: the International Neuropsychological Society, the Australian Society for Traumatic Stress Studies, the International Society for the Study of Dissociation, and associate member of the Australian Society of Hypnosis.

She has served as Chair of the Queensland Branch of the College of Clinical Neuropsychologists and President of the Australian Society for the Study of Brain Impairment and as a member of the Queensland Professional Conduct Review Panel and the Queensland Nursing Council Health Assessment Advisory Panel.

Dr Ewing has given lectures and workshops around Australia and currently provides annual lectures in medico-legal expert testimony and ethics in the post-graduate clinical psychology program at the University of Queensland. Having worked in three states in Australia and in three countries across the globe, she now works in full time private practice in Brisbane.

Her practice includes both assessment and treatment of a broad range of disorders, including both clinical psychology and neuropsychology referrals. She has specialised for over thirty years in the treatment of post-traumatic syndromes, particularly those relating to military service and childhood sexual abuse.

Carolyn Quadrio Associate Professor in Psychiatry, University NSW

Carolyn Quadrio is also in private practice in Forensic and Child and Family Psychiatry, particularly in relation to sexual and intrafamilial violence and Family Law. She teaches individual psychotherapy and marital and child and family therapy.

Carolyn was formerly Chairperson of the Binational Committee for Advanced Training in Psychotherapy for the Royal Australian and New Zealand College of Psychiatrists and Director of Mental Health Services with Corrections Health Service in New South Wales, Australia.

She is well known for her research on women in psychiatry and sexual abuse of patients in therapy. Her current interests include prevention of childhood abuse and the role of trauma in relationship to psychiatric disturbance.

Professor Russell Meares

Professor Meares is Emeritus Professor of Psychiatry at Sydney University. He trained in Psychiatry at the Maudsley and Bethlem Royal Hospital, London where he began a partnership with Robert Hobson, in developing the Conversational Model, a mode of psychotherapy suitable for treating personality disorder.

This model is built around the nature of self and trauma systems with its theoretical basis in experiential, neurophysiological, development and linguistic data. The main ideas underpinning the model are found in his books: "The Metaphor of Play," "Intimacy and Alienation", and "A Dissociation Model of Borderline Personality Disorder."

He was the foundation chair of Psychiatry of Sydney University at Westmead Hospital, 1981, Foundation President of the Australian and New Zealand Association of Psychotherapy in 1989. Professor Meares has authored in the vicinity of 250 scientific publications.

Dr Richard Benjamin

Dr Richard Benjamin finished his Psychiatry training with the RANZCP in 2001, and his Adult Psychotherapy training in the Conversational Model of Meares and Hobson (largely a therapy that addresses the adult sequelae of childhood trauma in the therapeutic relationship) in 2009. He works in the adult public mental health service in Tasmania, predominantly in acute and chronic community work, although he also does some inpatient work.

Dr. Benjamin is particularly interested in the recognition and management of the long-term sequelae of childhood abuse in adult patients presenting with serious mental illness, and the systemic response to this patient group.

He is also interested more broadly in the system as it impacts upon all patients suffering with mental illness. In community work this particularly involves the issue of continuity of care and of carer, the benefits of the "in-house crisis team," and the importance of the therapeutic relationship in general.

In inpatient work he is also interested in the role of therapeutic engagement, and in the reduction of seclusion and restraint.

To see the full panel [click here](#)

Dr. David Leonard Reflects

ASCA Advisory Panel, MB, BS, DPM, FRANZCP, AM

Each edition of ASCA E-health we will be seeking the input of one or more members of our panel. We thank Dr. Leonard for providing the following for this edition:

"You asked if I could tell you something about my interest in working with people who have complex trauma backgrounds.

My interest goes back a long way. After training in medicine in Sydney and medical jobs there, in Adelaide and New Guinea, I commenced post graduate training in psychiatry in Edinburgh over 40 years ago. Training in psychotherapy was particularly strong at the Royal Edinburgh Hospital where I was working. It is, sadly, often neglected in current psychiatric training. One of my teachers at that time advised me to always make sure I was working intensively, psychotherapeutically with a small number of the most severely troubled and distressed people who had ongoing problems. He suggested I continue to do this for the rest of my career no matter what else I was doing.

He said that it was important that I did this for the sake of the people themselves, who needed time and the long term personal commitment of a therapist to get better. All too few people were prepared to commit themselves to intensive and sometimes long term care with people with such profound problems so the group usually missed out on the only treatment capable of helping them.

He said I should do such work for my own sake too because I would learn so much in the process. He assured me that my best teachers would be my patients

He said it was important also because in

the process of such work I would learn much which would be important to advancing knowledge about the problems of profoundly troubled people and how to help them. I could then communicate what I had learned to others and in that way increase the number of people available to help those with such serious problems.

Although for the next 30 years after I returned to Australia I worked in and sometimes directed a number of public mental health services throughout Melbourne, I followed his advice and continued ongoing individual work throughout my career with very disturbed and troubled people. Almost all of these people came from a range of traumatic backgrounds. Over the last 12 years, during which I have worked in full time private practice, I have focused more and more on such people.

They carry a range of diagnoses including depression, eating disorders, substance abuse disorders, borderline personality disorders (better termed, I always think, complex post traumatic stress disorder) and the range of dissociative disorders including dissociative identity disorder. Most carry a number of diagnoses simultaneously and usually have terrible stories to tell about horrific experiences early in their lives.

"Sometimes keeping people afloat seems the best that can be achieved in the face of the effects of very severe trauma."

Was my teacher correct in his advice? I think he was and I am glad I have tried to follow it. Certainly there is a great need for

fairly long term and committed care to help with the problems of most traumatised people.

This is sadly in short supply. I have by no means always succeeded. Sometimes things have gone well. Sometimes I fear I have failed abysmally. Sometimes my success was in just keeping people going - rather than resolving their problems.

Sometimes keeping people afloat seems the best that can be achieved in the face of the effects of very severe trauma.

Treatments have had to be very complex involving a mix of biological and psychosocial interventions which psychiatrists by their training are often well placed to develop and deliver if they have a mind to. Sadly many of my colleagues are not interested in such work. Nearly always I have been humbled and moved by the appreciation that my patients have shown for my efforts even if they seem to me at times very inadequate.

I certainly have learned a great deal from the people I have worked with. In particular I have learned to respect and admire them in their struggles to survive and in the ways many have risen above their experiences to show great humanity to others and to achieve much in their lives. I have also learned, unfortunately, about evil and its pernicious effects from the stories they have told me about what they have endured.

I hope my work has placed me in a position to make a contribution to training of others and to educate my colleagues about trauma and its impact. I hope to be able to use this knowledge to make a contribution to the Advisory Panel.

David Leonard

From Crisis Response to Prevention: protecting Australia's children

As a member of the Coalition for Protecting Australia's Children, ASCA has been pivotal in bringing the issues of adult survivors of childhood trauma and the need for greater awareness, professional support for survivors and their supporters, education and training for health professionals and community workers, and a trauma informed approach to care to the fore. To read the Coalition document please [click here](#). This document was presented to Commonwealth, State and territory governments and will guide the development of the second 3 year plan for Protecting Australia's Children

Workshops

Workshops for Health Professionals

ASCA's one day Workshop for health professionals is grounded in the latest research into identification and responsiveness to complex trauma and a trauma informed approach to care and practice.

It provides education about complex trauma and its long-term consequences, an overview of therapeutic models and guidelines for informed practice. Our aim is to equip practitioners with knowledge and skills to better support adults who were abused, neglected or traumatised as children, towards recovery.

This workshop covers:

- Understanding abuse and its impacts
- Coping strategies and defence mechanisms used by survivors of child abuse
- Common impacts of child abuse
- Treatment models and best practice guidelines for working with adults surviving child abuse.

Full day workshop 9:00am-5:00pm

Cost: \$250 (full) / \$190 (concession)

For more information and to register go to www.asca.org.au/workshops

Workshop Date	Location
Friday 18 May	Sydney
Friday 25 May	Melbourne
Friday 1 June	Adelaide
Friday 15 June	Canberra
Friday 22 June	Brisbane
Friday 29 June	Perth



Professional development endorsement:

- APS Endorsed Activity 7 CPD hours.
- AASW Approved Activity 14 AASW Points
- ACMHN Endorsed Activity 7 ACMHN CPE Points

Workshops for Survivors

ASCA's Creating New Possibilities workshop are designed specifically for adult survivors of childhood abuse.

Focusing on safety, self care and seeking support these workshops help survivors connect their childhood trauma (from abuse, neglect, family violence/dysfunction) to their behaviours and feelings in the present, while providing tools for positive change.

These half-day (9.30am – 12.30pm) workshops are open to all adult survivors, as well as their supporters.

Cost: \$50 (full) / \$25 (concession)

Workshop	Date	Location
Finding the Support You Need	19 May	Sydney
Finding the Support You Need	26 May	Melbourne
Finding the Support You Need	23 June	Brisbane

FREE Workshops for Fairfield Residents

ASCA's workshops give survivors and those supporting them, information about child abuse and how it is linked to a range of survival and coping strategies, as well as tools for recovery.

Info Session for local agencies 5 APRIL | 930am - 1130am covers impacts of childhood trauma and benefits to your clients and workers from attending specialist training offered by ASCA.

Community Workers workshop 4 MAY | 830am - 5pm trauma informed training providing information and tools for workers interacting with clients who have experienced complex trauma in childhood.

Survivors "Creating New Possibilities" workshop

9 JUNE | for men only | 930am - 1230pm

16 JUNE | for women only | 930am - 1230pm

Register Online: asca.org.au/workshops

Venue: Cabra-Vale Diggers Club 1 Bartley Street | Canley Vale NSW

Cost: No charge

ASCA In-house Workshops: Tailored to Your Needs!

ASCA in-house workshops for health care professionals, community workers and/or volunteers provide current information incorporating best practice guidelines for working with adults surviving child abuse.

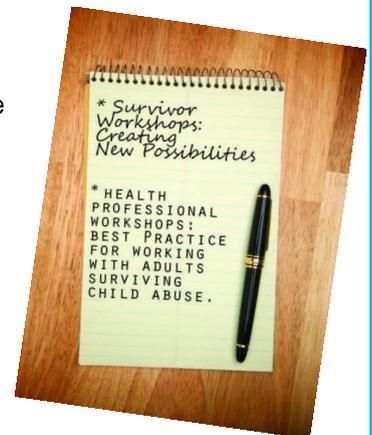
Your team can also request the topics which interest your organisation and focus on issues pertinent to your clients and practice.

Whilst workshops are generally one day in duration, 2 day and half-day workshops can be arranged.

Workshops for survivors are also available in-house on request.

Workshops for health workers/health care professionals and/or volunteers cover topics such as:

- Understanding abuse and its impacts
- Coping strategies and defence mechanisms used by survivors of child abuse
- Common impacts of child abuse
- Pathways through which adult health can be compromised
- Treatment models and best practice guidelines for working with adults surviving child abuse
- Reflective practice and vicarious traumatisation
- Application exercises



For more information on ASCA's in-house workshops please contact: Catherine Davis on 02 8920 3611 or email admin@asca.org.au