he Australian Childhood Trauma Group's (ACT) Roadmap to Recovery captures the essence of trauma counselling — that relationship is central to meaningful recovery. Our presenter Nick Grainger, trained in psychology and employed as a social worker by the ACT, took us through the impacts and therapeutic needs of childhood trauma survivors as identified from the Royal Commission into institutional sexual abuse.

We now know plenty about the brain, courtesy of neural imaging technology, but how much do we think about the implications of brain damage which comes as a consequence of a child's experiences of sexual abuse? What does it mean for the person who has little or no emotional control mechanisms due to limited limbic system function? It is sometimes tempting to 'write them off' as making poor choices (moral failure?), but all choices make sense to the person who is making them at the time they are made. Nick highlighted the value of understanding the choices in the context of survival responses: fight or flight, freeze or numb, faint or feist. We are perhaps familiar with the fight and flight response occurring when an excess of cortisol enters our nervous system. This response is significantly heightened for a person who has experienced sexual abuse during childhood and is not under conscious control unless such control has been learned. Freeze/ numb responses may indicate dissociative processes Dissociation enables the survival of the person (it has been termed "the escape when there is no escape") and involves a disconnection in the normally integrated functions of thinking, feeling and acting. It does however come at a significant cost. Fainting is intended to restore blood supply to the brain region – we often encourage a person who has had a shock to lie down. It's interesting to consider the consequences of how brain function might be limited in a child who has experienced sexual abuse. Memory and recall are often compromised, the abuse is recalled in fragmented form if at all and the child has little opportunity to make sense of the experience without external support. The feist response is the helpless child's call for help, however in an adult this may look like an angry outburst or tirade of verbal abuse, complaint or fault-finding.

What might it be like to have no internal thermostat by which to regulate emotional states? How frightening would it be to have little or no control or understanding of our emotional states and the physicality of these? We would find ourselves at the mercy of external sources of help, or in a situation of over-using avoidance or control of the other person as a regulatory mechanism. When the majority of the fears and triggers occur in the context of relationship, engaging relationship of itself becomes fraught with terror and survival responses. Imagine what this might be experienced by a person seeking help? No wonder that the very act of engaging in counselling is a mark of great courage for those seeking to overcome childhood abuse. Add to this the very pertinent fact of emotional fear, shame and avoidance of vulnerability and we might begin to understand the real and present danger for those who come for help.

How might we offer help and support? We offer it best when we do so with an attitude of humility and awe at their courage. We do it more helpfully when we behave with sensitivity, care and respectful partnering with the person. We do it brilliantly by being with the person rather than doing to the person. Being with includes maintaining a calm presence while providing your full attention. When a person becomes emotionally dysregulated the counsellor's ability to maintain calm and connected behavior may be instrumental in helping the person to regain their emotional equilibrium. This is emotional support, as is validating, acknowledging and helping them to find words for their emotional experiences. Being with includes being an emotionally safe person, not minimizing, avoiding or judging their feelings. The consequences of being in relationship need to be acknowledged and evaluated – being includes consistency, reliability (doing what I tell you I intend to do) and responsibility for repairing inevitable relational rifts. Being reliable in relationship involves holding the complex balance of supporting their fragility while encouraging their strength. It is wise to acknowledge their ways of being and means of coping as strengths. To seek to correct or replace that which has enabled survival is more than unhelpful, it may be seen as dishonouring and disempowering. Could it be that personality disorders are ego-defences which make sense in the context of early life development? While self-destructive and avoidant behaviours correlate with worse (interpersonal) adjustment (Merrill et al 2001) and negative or maladaptive coping strategies are predictive of re-victimisation (Filipas & Ullman, 2006), such actions may be seen as the best a child could do given early life experience. They are better understood in the context of the person's interpersonal relationships by exploring what they are intended to achieve, what needs they are created to meet.

And what of the helper? The cost and consequences of working with those who have experienced childhood sexual trauma has long been acknowledged. Nick's presentation encouraged us to have personal safety and self care plan, and to monitor personal wellbeing, knowing ourselves, our stress symptoms and personal strategies for resilience and wellbeing.

The Australian Childhood Trauma Group can arrange for presentations in most Australian states, informative, interactive and illuminating, it's a professional development event well worth attending.

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