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DEVELOPING PEOPLE AND ORGANIZATIONS**



**THE THERAPEUTIC VALUE OF READING AND WRITING IN WORK WITH
TRAUMATIZED CHILDREN**

- 1. About This Blog – Patrick Tomlinson**
- 2. The Value of Reading and Writing in Work with Traumatized Children - Part 1
Patrick Tomlinson (2014)**
- 3. The Value of Reading and Writing in Work with Traumatized Children (and Story-Telling
Too!) Part 2 - Patrick Tomlinson (2014)**

WHY I WRITE A BLOG

I write this blog because I enjoy writing and I like the idea of creating something, which lasts and can be used in a positive way. I began writing blogs in 2014 and 6 years later, there are 34 included here. I began with a bold ambition, which would have led to more than double that. However, I have learnt much about the challenge of an ongoing writing process and am happy with the output. [Viktor Frankl](#) explains very well the benefit of being over-optimistic.

This blog is broadly related to issues of development, for people and organizations. I began my career, in 1985, in a therapeutic community in England. The community was for boys whose development had been impacted by trauma, abuse, and neglect, during their formative years. Our work was to provide the conditions, in which the boys could recover their developmental losses and achieve healthy functioning into adult life.

Fairly soon in my career, I realized that the development of the young people was closely connected to the development of the adults working with them. And this, in turn, is connected to the development and functioning of the organization. And this relies upon the quality of leadership and its development. Residential care of severely traumatized children and young people can be an extreme occupation. This can be so both physically and mentally. When I began, we worked 70-80 hours a week, and it was only a few weeks before my nose got broken. Many workers who left did so due to the huge emotional demand upon them. As with all extreme forms of work and endeavor, there is also a huge opportunity for learning and development. As well as the technical aspects of the task much can be learnt about matters such as, leadership, individual, team, and organizational dynamics. As we have seen with leaders from the military, much of what is learnt can be applied widely to other settings.

So, while this blog is born out of my specific professional experience it is aimed to be widely relevant. The style of the blog has a focus on Integration. This is very relevant to the first 14 years of my career at the therapeutic community – where the task of the work was to help emotionally ‘Unintegrated’ children, to become ‘Integrated’. The concept of integration is now also used widely in neuroscience. In this blog I try to integrate various themes from many different professional disciplines, such as the psychodynamic approach and neuroscience; the micro and macro levels; the past and the present; and from different cultures.

I want to be practical and offer links to relevant resources wherever I can. I hope you will find something helpful, useful and thought-provoking. The content in this document includes some of the thoughtful and kind comments made by readers. I have included those that add something additional to the subject. On occasions, after I had written a blog, further thoughts developed, so in some cases, I added them. I think this shows how writing can be helpful in terms of development – once we get some thoughts out, there is space for new ones to evolve. As each blog was written to stand on its own, there is some repetition between blogs. I have grouped blogs with the same theme together.

Reference

Frankl, V. (1972) *Why Idealists are the Real Realists* www.youtube.com/watch?v=loay2imHq5E

THE VALUE OF READING AND WRITING IN WORK WITH TRAUMATIZED CHILDREN PART 1 (2014)

As this is my first blog it seems fitting to write something about the value of reading and writing in our work with traumatized children. I will also say a little to introduce myself. With all my blogs, I will just aim to share something that is hopefully useful and thought-provoking – I see writing and reading as a way of stimulating a process rather than providing a definitive answer.

Back in 1985, having finished my degree and a year out on a Kibbutz in Israel – I needed to get a job and I had decided to work with children who had difficult childhoods. The first job I applied for, through a small newspaper advert was at the Cotswold Community, a therapeutic community in the Cotswolds, England, for ‘emotionally disturbed’ boys. Like a small village on a farm with 4 houses for the boys, 10 in each – and most staff having their own houses on the 350-acre site. The Community had been set up by the Government as an experiment and alternative to the ‘Approved Schools’, which had been a disaster. 85% of residents eventually ending up in prison. The therapeutic approach of the Community was a success, reversing that figure. It had become established as an internationally renowned ‘centre of excellence’.

I didn’t understand much of this when I started. Previously I had done a few evenings at a youth club and a module on social psychology on my social administration degree. However, it was deemed through the selection process, which included a 3-day visit, that I had a suitable personality for the work.

Many of the boys had suffered extreme levels of abuse and neglect, often beginning from birth. What I saw in my first few weeks was shocking to me. I had no idea that young children could be so developmentally delayed, with such extreme behavior purely because of their adverse experiences.

As soon as we began work, each new staff member joined a weekly training group (around 8 of us in a group). We would be given a paper to read in advance and then in a 1-hour meeting, discuss its relevance to our work. We were thrown in at the deep end in many ways. But we had a lot of support around us. We were given papers by well-known people in the field such as Donald Winnicott, Bruno Bettelheim, Isabel Menzies-Lyth, Fritz Redl and David Wineman, and Barbara Dockar-Drysdale. Some of the reading was difficult to understand at the time. However, some of it was so helpful to me in explaining what I was experiencing.

The expectation on us to read, relate what we read to our own work experience and develop our own thoughts was very significant. The work with the boys was often bewildering, confusing and completely impossible to understand. It could be challenging to the point of overwhelming and soul-destroying. I now understand this as a reflection of the children’s own experience of the world they grew (or didn’t grow) up in. Without the reading, the guidance of the senior people in the organization and the space to think about the work together – there would have been little possibility of making sense of anything.

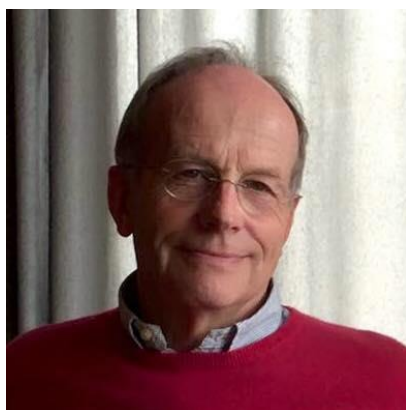


Our consultant, Barbara Dockar-Drysdale would often begin a meeting by asking what we had been reading. She would be most concerned if she discovered people weren't reading very much. This was not something you wanted to disappoint her on!

In recent years, I have read some of Dr. Neil Thompson's work and I like what he has to say about the importance of theory. There can be a tendency in work with children to say, 'it's common sense'. Neil argues

strongly against this notion. Common sense suggests there is a normative way of thinking. Whereas, common sense is often a cultural perspective and exclusive to those who belong to that culture and way of thinking. The idea of common sense doesn't encourage critical thinking. If it's common sense what is the need to analyze, think or debate? So, reading can give us a perspective that might be outside of our own experience. This is especially important in work with traumatized children – partly because few of us may have experienced what they have. The solutions to what is not a common experience are also often not 'common' sense.

The kind of therapeutic approaches that are most helpful in our work are often counter-intuitive. For example, these are a few ideas that I have found very helpful; delinquency can be a sign of hope (Winnicott); getting better can make things worse; depression can be a good thing – as one young boy said to me, 'I don't need cheering up, I need cheering down'. Reading helped me learn and understand these concepts.



My next blog will continue this theme. The person who started me off in my career was John Whitwell the Principal at the Cotswold Community back in 1985 – I had the fortune to work with him for the next 14 years. For a little more reading, this is his excellent website, which has many papers and resources by people that were involved with the Cotswold Community.

www.johnwhitwell.co.uk

THE VALUE OF READING AND WRITING IN WORK WITH TRAUMATIZED CHILDREN (and Story Telling too!) - PART 2 (2014)



I said in my previous blog, that in my first job at the Cotswold Community we were expected to read about our work with traumatized children.

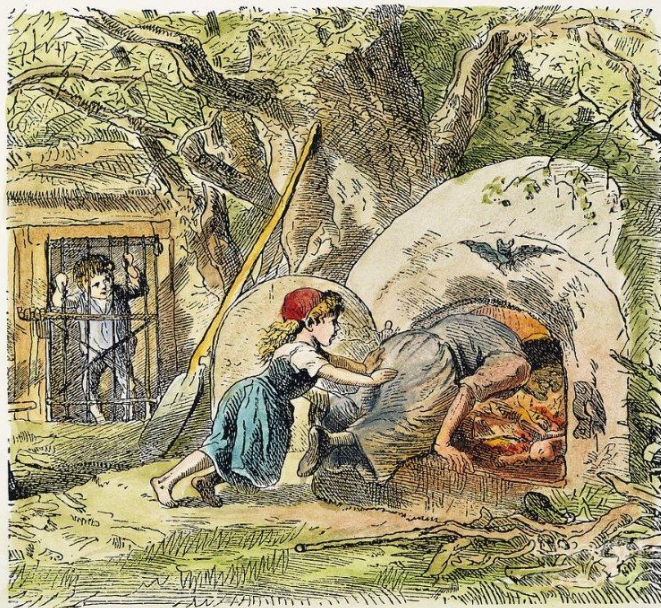
Thinking about this, I have realized that our culture also had a big emphasis on reading to the boys. Every night (more or less) we ended the day, with a small supper and everyone would sit in a circle while one of the adults would read a story for 10-15 minutes. As well as

the story being enjoyed, the consistency of this routine was also very important. We know that repetition and a reliable routine is one of the most important elements in the work with traumatized children. Making the world around them an intelligible, predictable and safe place, and helping with emotional regulation. This can be especially important at the end of the day, which is often the most stressful time for traumatized children.

After the story, the boys would go to bed, and some of them would ask their carer to read to them while they settled down. Another part of our culture was to provide individual reading times during the education day. Some of the boys had little vocabulary, couldn't read very well and may not have experienced being read to before. Research (Hart and Risley, 1995, 2003) has since shown how important having a rich vocabulary is for a child's development. Being able to form a narrative is also very important for traumatized children. The story of their trauma is unfinished. It had a beginning that just keeps going relentlessly on, whereas a story has a beginning, middle and end.

It is interesting to think that many of the stories told to infants, by their most trusted carers are often frightening. They involve witches, monsters, and grandmothers disguised as wolves to devour the unsuspecting child! There may be something satisfying about being told such stories, surviving and being able to move on from it. Children who are traumatized are stuck and not able to move on from their all too real stories of terror.

A story told becomes something between two people, that both can have a role in managing and relating to. Many 'fairy stories' are symbolic of primal fears and desires. In a sense, the story can be a safe way of the parent bringing a primal issue to the surface and helping manage the feelings associated with it. So, the parent or carer becomes an ally of the child in dealing with these issues, as well as the focus of them! The stories often represent the dynamics of parent-child relationships.



Of course, not all childhood stories are frightening. But there is a reason why stories such as Hansel and Gretel, Snow White, Little Red Riding Hood are so enduring and intuitively read by parents to their young children. Probably the fact that the story is usually read from a book is of some relief to the child, who might otherwise fear that such ideas could come straight out of the parent's head!

Writing about the educational aspect of learning and stories, [Shonkoff and Phillips](#) (2000, p.156) capture the essence of the pleasure that can be involved in being read a story,

Accordingly, the literature on early learning environments is not about accelerating learning with expensive toys and explicit early instruction. Instead, it focuses on how adults interact with young children and set up relatively ordinary environments to support and foster early learning. While this sounds like a subtle distinction, it captures the difference between a child who is taught to recite the alphabet and a child who is read to every night and becomes interested in letters and words because they are associated with the joy of being in her father's lap, seeing beautiful pictures, and hearing a wonderful story.

At the Cotswold Community, as well as being expected to read – we were also expected to write. Our yearly calendar was divided into terms or what we called 'sessions'. Each one being 6-8 weeks long. After each session, all staff members were expected to write an 'end of session report'. The remit was broad – anything relevant to our recent work experiences that we wanted to share. It could be short or long – normally between a paragraph and a page. Sometimes people would write about their work with a child; or a group of children; their experience in a team; an organizational issue; a concept or idea they were thinking about. Once all the reports were written (usually about 30 of them) they would be typed and distributed for all the staff to read. We would then discuss them in various meetings throughout the Community, picking up on themes and pertinent issues.

This process required a high level of commitment and discipline. I have never come across anything like it since. At the Community, it was done without fail for over 15 years. The process of writing required us to be reflective – to think over a period and consider what stood out? What questions did we have? What were we learning? What did we feel worth sharing? It also enabled us to realize that by writing about our own experience, we could make a difference and have an influence in the organization. It was a feedback loop from the individual into the system. Feedback loops like this are vital for the health of a system. They provide essential

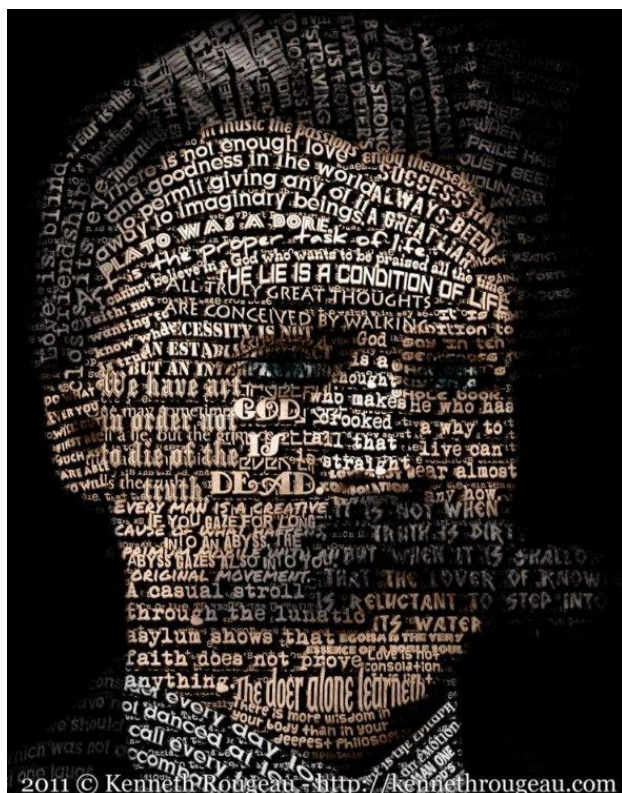
knowledge of what is going on. We could also write things that might cause a negative reaction – there are always challenges involved in writing and expressing ourselves. Encouraging open communication is central to the task of enabling traumatized children to recover, so it is essential to establish this in the culture.

Early in my career, I learnt that in our work we are also researchers. Though we learn from people who went before us, we were also encouraged to add something to an existing idea or concept, through our own experience. Tom Farrelly (2013) states the two-way process of this,

However, as well as being consumers of research, practitioners can and should strive to be producers of research.

Numerous people working at the Community wrote papers or in a few cases, books. This was a little intimidating but also inspiring. The ‘model’ for our work was closely linked to the Psychoanalyst and Pediatrician Donald Winnicott, who also happened to be a prolific writer.

Writing has continued to be a theme in my work. A few examples – when I studied for an MA in Therapeutic Child Care in the 1990’s we were required to keep a reflective journal. Simply writing a diary of one’s work, what stood out, what sense we made of it. Writing can be an excellent way of reflecting, which is so important in social work/therapy. It can also be helpful to one’s development in general.



As Friedrich Nietzsche said, writing can also be a good way of just getting rid of thoughts! He actually said that he had found ‘no other way of getting rid of his thoughts’ (Gane and Chan, 1997, p.39).

If we write, we might also find we have a dialogue with ourselves. We may see something we hadn’t noticed before and our ideas can change shape as we write.

After the Cotswold Community, I moved on to work at SACCS in the UK, who also work with traumatized children and young people. One of the unique approaches used at SACCS was its Life Story Work. This enabled children to tell their own stories and work through the feelings and issues involved. They would do this in words, pictures, drawings and symbols that would be made into a life story book.

This process was hugely valuable to many children. For adults as well as children, writing can be a form of working through trauma. Putting the story down can bring a sense of closure. Having a coherent narrative is something that a traumatized person often doesn't have, so developing one that can be integrated as part of one's identity is a goal of recovery. Bessel van der Kolk and Alexander McFarlane (2007, p.17) state,

Treatment needs to address the twin issues of helping patients (1) regain a sense of safety in their bodies and (2) complete the unfinished past. It is likely, though not proven, that attention to these two elements of treatment will alleviate most traumatic stress sequelae.

Completing the 'unfinished past' can be considered as completing the unfinished story. The story of trauma that has a beginning but not an end. On a similar theme, our child psychotherapist consultant Barbara Dockar-Drysdale, used to suggest that if we thought of a nightmare as an unfinished dream, it might help us think with a child about how it might be completed. Often this was a helpful perspective.

I also work with the Lighthouse Foundation in Melbourne, Australia – who provide a Therapeutic Family Model of Care for homeless young people. Lighthouse has a strong belief in the value of storytelling. It is built into the culture of the organization. It could be said that our stories define who we are, and it is the sharing of them that creates our individual and shared identities. Stories are often told without writing. The verbal tradition of storytelling is powerful and well established – but putting something into the written word, is an essential part of our culture and work.

While writing this blog I was jogged into looking up my old 'end-of-session reports' and found that I still have them. Here is my first brief report.

December 85

I joined 'Springfield' (one of the homes) for the last five weeks of the session. The session seemed to be quite a steady one though the Christmas week was very busy. I think that I have settled in well and am getting used to the demands of the work. However, I definitely wouldn't describe my experience as a 'Honeymoon'. I have come in for quite a lot of testing out, especially from two of the boys. Quite often I have felt that I should have known more about what is going on and what to do in certain situations. I have realized how important communication within the team is and reading, in helping to overcome this. The weekly training group has also been useful.

My next end-of-session report described how I got my nose broken - it was a steep learning curve!

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van der Kolk, B.A. and McFarlane, A.C. (2007) *The Black Hole of Trauma*, in van der Kolk, B. A., McFarlane, A. C. and Weisaeth, L. (eds.) *Traumatic Stress: The Effects of Overwhelming Experience on Mind, Body and Society*, New York: Guilford Press

Comments

Liza Aitken, Management Consultant, England

I really enjoyed this Patrick. I love stories and believe they teach us as adults as much as they teach as children. All of us can make sense of the world through stories.

Patrick Tomlinson

This is a good blog by Lisa Cherry on writing, she also writes on Trauma - What do we Really Gain from our Writing? <http://goo.gl/NnJsZ5>

Catherine Knibbs, Cyber Trauma & Abuse Researcher, Supervisor and Child Trauma Therapist, England

I use stories as they are cohesive for the narrative and experiential parts of the brain, which in traumatised children is often un-integrated. Using this method builds top down/bottom up and left/right integration. Nice blog, thanks for sharing!

Patrick Tomlinson

Thanks Catherine - Interesting what you say - as the children I refer to at the Cotswold Community - were assessed as emotionally unintegrated (Winnicott's concept of unintegration) and our task was to enable them to achieve emotional integration. More recently Dan Siegel (2006) has said,

The central idea of interpersonal neurobiology is that integration is at the heart of well-being.

This has just been recommended to me by someone who read the blog. Frank Cottrell-Boyce: *Open the Box of Delights* - a video of his talk at this year's CELSIS conference in Scotland, on the importance of reading to children and storytelling, <http://goo.gl/AeXeXE>

When a child is read to, they experience alertness and attention without anxiety. Reading aloud offers children and young people the experience of sharing with peers and carers and joining with the long traditions from which our cultures are built.

One of the points Frank Cottrell-Boyce makes in the video below is that being read to does something special and important to a developing child's brain. It is so powerful, such that Frank says reading to children, purely for pleasure should be a part of daily life. Just as we did at the Cotswold Community with our bedtime stories and individual reading times. We believed in the value of these experiences, which was focused more on pleasure rather than education.

Frankie says that reading stories should be provided unconditionally, without expectation of a response at the time. He says that stories are stored in the mind and may be used or come back to a person, when they need them in the future. He points out that we get through life by routine and predictability, and stories provide a safe way of experiencing unpredictability - also of imagining ourselves outside of where we are. Frank's views affirm, what I have mentioned about the importance of the daily routine. We also used to provide individual children, reading times during their education day - where they would simply be read to for 15-20 minutes or so.

Reference

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Postscript

Since writing those blogs I came across this article, *Science Shows Something Interesting about People who Love to write*, <http://goo.gl/y8tgjU>

The article refers to research suggesting that writing may have physical as well as mental health benefits. Some of the claims initially sound a little farfetched. However, there is a logic to the idea – reflection, which can be achieved through writing, helps to create a perspective, which can reduce stress, which is likely to impact positively on physical health. Interesting to think how the professional requirement to write, which I refer to in these blogs may have provided a more significant antidote than we realized.

And just recently I found that Bessel van der Kolk (2014, p.239-240) has reported the same thing in his book, *The Body Keeps the Score: Brain, Mind and Body in the Healing of Trauma*. He refers to an experiment carried out by James Pennebaker at the University of Texas in 1986,

He began by asking each student to identify a deeply personal experience that they'd found very stressful or traumatic. He then divided the class into three groups: One would write about what was currently going on in their lives; the second would write

about the details of the traumatic or stressful event; and the third would recount the facts of the experience, their feelings and emotions about it, and what impact they thought this event had had on their lives. All the students wrote continuously for fifteen minutes on four consecutive days while sitting alone in a small cubicle in the psychology building.....The team then compared the number of visits to the student health center participants had made during the month prior to the study with the number in the month following it. The group that had written about both the facts and the emotions related to their trauma clearly benefited the most: They had a 50 percent drop in doctor visits compared with the other two groups. Writing about their deepest thoughts and feelings about traumas had improved their mood and resulted in a more optimistic attitude and better physical health.

And,

Writing experiments from around the world, with grade school students, nursing home residents, medical students, maximum security prisoners, arthritis sufferers, new mothers, and rape victims, consistently show that writing about upsetting events improves physical and mental health. (p.240-241)

Reference

Van der Kolk, B. (2014) *The Body Keeps the Score: Brain, Mind and Body in the Healing of Trauma*, Viking: New York

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LinkedIn Discussion Group: Therapeutic Residential and Foster Care for Traumatized Children

LinkedIn Discussion Group: Staff Recruitment and Development (for People and Organizations)