Generational Violence
Generational Trauma
Generational Incarceration
Generational HEALING

Judy Atkinson Emeritus Professor
Patron: We Al-li - Healing People Sharing Culture Regenerating Spirit
Acknowledging the Lands, Ancestors, Elders and Peoples of the Wathaurong nation, with greetings from the lands of the Bundjalung
Dadirri – Listening to one Another

- Ngangikurungkurr - dadirri - listening to one another in contemplative - reciprocal relationships.

- Pitjantjatjara - kulini (listening), or pulgkara kulin tjugku (really (deep) listening, and wanting to listen).

- Bundjalung - gan’na hearing, listening, feeling, thinking, understanding.

- Gunmbayngirr - junga-ngarraanga miinggi - hearing, learning, understanding, knowing from the heart.

Artwork: Chris Edwards Heines, 2004
An abusive husband killed his wife in front of their young child ‘J’.

A decade after witnessing his mother’s violent homicide, ‘J’ planned and executed a brutal rape and homicide of his young female neighbour.

This followed an extensive criminal history of sexual assault, robbery, delinquency by ‘J’ which commenced shortly after his mother died and while his father was incarcerated for her murder.
New South Wales - 208,476 - 2.9%

- Of the 108 female intimate partner homicide victims, 12% identified as Aboriginal.
- Of the 35 male intimate partner homicide victims, over one-third (34%) identified as Aboriginal.
- Of the 52 child victims of homicide, 15% identified as Aboriginal. All Aboriginal child victims were between 0-4 years of age.
- No woman killed her child.
• Approximately 10% of men who killed their female partner in a context of domestic violence identified as Aboriginal.

• Just under a third of all women (31% who killed their male intimate partner in a context of domestic violence identified as Aboriginal.

• (NSW DVDRT. 2012 2013)
• 3 of the 12 intimate partner homicides ... involved a female domestic violence victim killing her abusive male partner. In all 3 of these cases the abuser died as a result of a single stab wound.

• Conversely, of the 9 female domestic violence victims killed by their abusive male partner, most died as a result of a prolonged physical assault, often involving the use of multiple weapons (including blades, blunt objects and in one case a gun) to inflict multiple injuries.

• (NSW DYPDRT. 2012 2013)
Understanding the Trauma Story
“The Violence - Trauma Vortex”
“Symptom as History”

- Understanding the trauma story
- Historic, Collective, Social, Cultural, Complex Developmental Trauma.

The Story of Dolly
Generational trauma
its cause and effect
destruction of cultural worldviews

- Salzman and Halloran (2004), describe the destruction of cultural worldviews which have sustained Indigenous peoples for millennia;

- a collective experience across diverse cultures and peoples: the Yup’ik of Alaska; Navajos and Athabaskan Indians; Hawaiian Natives; Maori in New Zealand, and Aboriginal Australians,

- all having experienced similar physical, social, behavioural and psychological symptoms (eg high rates of suicide, alcoholism, accidental deaths, and layers of loss grief and trauma (p. 233).
Trauma can become generational, unless healed

Collective - Historical

• Collective trauma is the “psychological blow to the basic tissues of social life that damage the bonds attaching people together and impairing the prevailing sense of community” (Erikson, 1976 p. 233), “a gradual realization that the community no longer exists as a source of nurturance and that part of the self has disappeared”.

• Historical trauma is ‘the collective emotional and psychological injury, in the life of an individual or of a community, both over the life span and across generations’, (Muid, 2006, p. 36).
When we ignore generational trauma

5 generations - South America

• 1\textsuperscript{st} generation. colonised – males killed – imprisoned – females sexually misused

• 2\textsuperscript{nd} generation. Men turn to alcohol or drugs as their cultural and spiritual identity is damaged – self worth.

• 3\textsuperscript{rd} generation. Spousal Assault -- Societal trauma

• 4\textsuperscript{th} generation. Abuse moves from spousal assault to child abuse or both.

• 5\textsuperscript{th} generation. Cycle repeats as trauma begats violence begats trauma. (Blanco, in Levine)
• to ourselves
  – physically
  – emotionally
  – mentally

• to others
  Family
  social group
  generation
  culture

• to nature
  instinctually
  environmentally
Childhood trauma including abuse and neglect, is probably the single most important public health challenge ... (we face) ... a challenge that has the potential to be largely resolved by appropriate prevention and [healing].

ACE- Outcomes of trauma are:

- Violation of child’s sense of safety and trust, of self worth, with a loss of a coherent sense of self,
- Emotional distress, shame, grief, self and other destructive,
- Unmodulated aggression, difficulty negotiating relationships with caregivers peers and marital partners,
- Clear link between suicide, alcoholism and other drug misuse, sexual promiscuity, physical inactivity, smoking, obesity,
- More likely to develop heart disease, cancer, stroke, diabetes, skeletal fractures, and liver disease, mental health issues.
- People with childhood histories of trauma make up almost our entire juvenile and criminal justice populations. (van de Kolk ibid)
creation of violent individuals, communities / societies

1. Living in a culturally unsafe environment

2. Being profoundly hurt as a child, as people

3. Being hurt, but being prevented from experiencing or expressing the pain of that hurt

4. Having no one in whom we can confide our true feelings, not being being heard, acknowledged in our pain

5. Having a lack of education or knowledge, therefore being unable to intellectualise the abuse

6. Having no way we can transform our pain, without repeating the cycle of abuse on ourselves and others.
Children’s behaviour at school tells us what is happening in their homes, in their families, in their communities.
Billy (1) is eight years old.

- Towards the end of a school day last week, coming towards the weekend, he suddenly turned on his teacher, grabbed her hair and pulled her to the floor where he proceeded to kick her in a frenzy. When another female teacher tried to intervene, he attacked her in a similar manner. It took a male teacher to restrain him enough to allow his frenzied behaviour to subside. His rage gave him strength beyond his eight year old body.

- Billy has seen his mother stabbed seventeen times. His mother goes to hospital and his father regularly leaves for another short time in prison for these ‘domestic’ assaults. When he returns from prison, as he has just done, Billy’s behaviour tells us what it is like for a child to live in a home where he regularly sees extreme violence on the one person who is supposed to protect him. (1. Obviously not his real name).
Children at Risk in a Special School
an Invitation

Programs for children parents teachers

Parents Carers Community Healing workshops

Teachers Professional Development

Research & evaluations

Children Educaring
What we did. … An action plan

Step 1: Meet with the newly appointed Principle a number of times to develop a strategic response to her articulated needs

Step 2: Suggested she introduce a new way of thinking: (inspiring staff to think of themselves as innovative change agents, not just teachers of bad kids)

Step 3: After formal invitation, entered a consultation and planning period

Step 4: Ran a half day presentation for the community - parents – carers, on a trauma informed – educaring approach to the needs of the children in the school – Invited them to become involved

Step 5: Ran a full day professional development workshop for staff. The workshop outlined the layers and outcomes across generations, of trauma, passed down within families and communities, with the critical need for generational healing. The implications of historic, social, cultural, complex and developmental trauma was presented, along with the theory and practice of an educaring response to trauma. *
What we found

**Diagnosis:**
- Emerging psychosis with mood depressive content – some paranoia (he thinks the world is unsafe)
- Suicidal ideation
- Chronic grief
- Chronic Complex Post Traumatic Stress

**Observable behaviour:**
- Highly sexualised
- Sexualised language
- Sudden uncontrollable rages,
- self harm - harm of others
- Subservient versus controlling
- Emotionally illiterate
- FAS
What we found:

- **the Teachers** - clearly experiencing burnout, vicarious trauma, and lack of theory, and skills to respond to children’s behaviour.
- Burnout – different for **Aboriginal workers** versus non-Aboriginal workers
- **The Parents Carers Community** - some parents demonstrate complex trauma symptoms and the community has ‘Symptom as History’ ... Historical, Social, Cultural trauma symptoms).
- Little communication between the various sectors responsible for children’s wellbeing.
- **Need for critical up-skilling of the workforce.**
The four main principles of neuro-development essential for early childhood curriculum

• 1. Sequential development

• 2. Use-dependent development
  – Neurodevelopment is dependent upon the presence, pattern, frequency and timing experiences during development music dance art reading conversation

• 3. Doors of opportunity
  – of all the experiences throughout the life of an individual, the organizing experiences of early childhood have the most powerful and enduring effects on the nervous system. The door of opportunity was the school!

• 4. Contextual development
  – Children learn in the context of their social environments. The school provided this social environment and became the children’s safe place.
Neuro-developmental rationale for healing trauma

Resonance – growth, and physical wellness, vitality, meaningful life- evidenced by responsiveness & responsibility - curiosity and openness promote growth.

Encourage Abstract thought
✓ Story telling- writing
✓ Drama theatre
✓ Art and music

Facilitate Emotional Regulation - relationships
✓ Dance - play – art –

Somato-Sensory Integration
✓ Movement & Yoga games
✓ Music
✓ Touch
✓ Nature Discovery

Establish State Regulation
✓ Safe touch massage pressure points
A Model for Healing -- Educaring
Trauma Specific Response to Children’s Needs

Hero
Theatre Dance Music Art
What the Teachers said

• “We have the freedom to teach in the way that the children need”.

“They are so excited about learning”.

“They are not angry any more”
What the children said

• I like music because I can feel the beat through my body.

• I like dance because I can tell different stories.

• I like body work because I feel calm and relaxed.

• I like theatre because I can be growly different characters.

• I like art because I can’t make mistakes.

• I like the nature discovery because I can learn things when I am outside.
What happened when we applied these principles in the school?

- Grandparents cried
- Literacy and Numeracy improved 150% - 300%
- Parents regularly visited the school
- Children never missed a day
- Children teaching parents
- Look I can read now
- It’s a cold morning
Children have agency

• Shelly is ten years old. One Monday morning she acted out extreme sexualized behaviour, to the extent the school principle decided a mandatory report had to be filed. While driving down town with one of the teachers, Shelly yelled out: ‘quick hide – that’s the rapist’. After a few seconds she continued: No - we have to get a photo of him. We gotta show the other kids ... don’t into his car. He’s a rapist. Later that day she went back down town, and got a photo of the man she called ‘rapist’, his car and its number plate which she then insisted be shown to the other children at the school and the community, and was then given to the police.
‘We don’t always see the whole picture’

• Alan is seven years old. Recently on a school excursion, when a car went past with its siren blaring, Alan erupted into extreme aggression on other children and the teachers who were with the children on the excursion. During that time he had to be held for his own protection and the protection of the other children. Other children on the bus some joined him – contagion. The next day the principle sat with him to talk about what had happened in the bus to make it unsafe. She asked him: ‘Alan do you ever feel scared?’, hoping to open a conversation about how his behaviour had effected other children. His response was ‘Oh I am always scared Aunty’, opening for the Principle, a deeper understanding of the world in which he lives and the way he has learnt to cope with overwhelming feelings of fear and panic.

• In debriefing, however we learnt something else … about how contagion impacts us all.
Women in Prison
Generational Incarceration

“To Circle into Truth Through Stories”
Dadirri

“To know me is to breath with me.
To breath with me is to listen deeply.
To listen deeply is to connect.

1. Anger Violence Boundaries Safety
2. Loss Grief Trauma
3. Re-creating the Circle of Wellbeing
Graduation!
The problem

• More than 60% of assault offences in the Northern Territory are associated with domestic violence.
• 82% of domestic violence victims in the Northern Territory are women.
• More than 70% of sentenced prisoners in the Northern Territory have one or more convictions of domestic violence-related offences.
• Indigenous females in the Northern Territory are almost 22 times more likely to be victims of domestic violence than non-Indigenous females.
• Indigenous females represent 73% of domestic violence victims in the Northern Territory.
An Integrated Response

eight key points of intervention between victims and frontline workers (NT Attorney General and Justice 2015)

Domestic and family violence reduction strategy

1. Hospitals and community clinics
2. Police
3. Courts
4. Child Protection
5. Housing
6. Schools
7. Correctional Services
8. Non-Government organisations and local government
In the Prisons
what the men said

1. The story - being heard and believed
2. Reclaiming culture as a source of strength and identity
3. Art and music allows me to feel and heal.
4. Increasing employment opportunites
5. Alcohol and other drug education
6. Incorporating traditional justice processes in the legal system
7. Breaking the Cycle starts with me!

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# The We Al-li approach to Community Wellbeing

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<td><strong>Safety and Security:</strong></td>
<td>Locate, develop and support safe places and safe caring people, within communities. Working together, help promote a sense of individual and collective safety and security, through community programs of mutual care and trust. Build on these capacities and commitments while promoting the understanding that change and healing is possible.</td>
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<td><strong>Calming, re-bonding from crisis:</strong></td>
<td>Calming is important when people have been distressed as traumatic events increase emotional turmoil. Establish talking circles (which can move into learning circles and healing circles) to provide a bonding through the structure of talking together to build community connections, communal attachment, community awareness of issues, without judgment, but with the desire to work together to support change and healing. Activities could include “education and training of coping skills, including deep muscle relaxation, breathing control, assertiveness, role playing, covert modeling, thought stopping, positive thinking and self-talk” (Hobfoll et. al.)</td>
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<td>Attachment and belonging:</td>
<td>“Large-scale community outreach and psycho-education about post-disaster reactions should be included among public health interventions to promote calming” (Hobfoll et. al., 2007, p. 292). Introduce an <em>educaring</em> program in communities, working with local people to deliver these packages, with educational modalities, that provide skills for community empowerment and a felt sense of efficacy. The educational model of reflective discussions and practice, helps draw out what people already know, emphasizing the central importance of social support and sustained attachments, building on a felt sense of competency and control while creating communal attachment and belonging, essential for ameliorating stress and trauma.</td>
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<td>Justice, Fairness and Dignity:</td>
<td>“Damaging effects of trauma events on people’s sense of meaning, justice and order can have extremely stressful effects. [People will] struggle with a sense of meaning and justice in the face of shattered assumptions about prevailing justice in the world” (Hobfoll, 2007, p. 285). Provide support and resources for people to build their community recovery. This involves a commitment to justice reinvestment. Such activities will include justice programs, promoting a sense of self and collective efficacy, fairness and dignity. In this, support must be given for the development of partnerships between communities and professional workers from outside organisations.</td>
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<td>Valuing Self Valuing Others - Role, Identity, self and collective:</td>
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<td>“Following trauma exposure people are at risk of losing their sense of competency to handle events they must face”. (Hobfoll et. al. 2007, p. 293). All humans must have a sense of control over their life circumstances and that such control will result in positive outcomes, more particularly through self-regulation of thought, emotions, and behaviour. This should also be extended to a collective sense that people belong to a group that can experience positive outcomes (Hobfoll, 2007, p. 293). A community development approach would provide support for both local community people, and for professional workers. Encourage inter-connectedness and social support in their roles and identities. Give value to the workers who are already doing the hard work, whether living within the community or those invited in to help in the recovery process.</td>
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<td>Focusing on a community development model over responses to individual needs, means groups can work together to help others, investing in early childhood programs, and in schools for children and their parents; promoting youth based creative and culture/environmental activities; for men and women, and for Elders. Such programs, while providing trauma and healing, grows a felt sense of hope, coherence, and consistency, for capacity building in making meaning of life, while enriching cultural and spiritual identities. (Atkinson, 2007; Hobfoll, 2007; Silove, 2007).</td>
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Indigenous Trauma Counselor Training

- **Why we did what we did**
  - We realised that people needed to be able to support each other in basic counseling - listening skills.
  - Wanted people to be able to act in peer support over the period of the educational (educaring) programs.

- **What we did**
  - ICT was designed to give people skills to be mind-full listeners. Blend of Indigenous and western counseling theory and practice. Co-counselling model. Learning to respond appropriately without rescuing -
  - modeling the healer holds the stories and allows the person or group to find their own answers.

- **What we learnt**
  - We found this unit was vital. It provided structure and stability so people could support each other at times of crisis after the actual training was finished, face to face in their families and communities, and on the phone.
Loss and Grief

What is the difference between loss and grief, victimisation and traumasiation?

Why we did what we did

- Loss and grief is one of the most important units, however grief, trauma can become confused.
- We saw the differences between loss and grief, and traumatisation, violence and incarceration.

What we did

- Introduced Loss History Graph. Impacts of multiple losses,
- Body awareness to locate body unhealed trauma
- Supporting people to work in pairs and small groups
- Ceremonies of healing.

What we learnt

- Generally people are carrying compounded loss and grief issues but need to understand the differences between loss and grief and trauma.
- It is important people come out of this module with a sense they can recover, because at this time there is no outlet from the compound grief of multiple losses.
- Facilitators needed to be continually doing their own work on loss and grief, because of their own personal lives interlinking with the professional practice (stories).
Why we did what we did – This is a trauma specific unit

• By this time we were hearing many trauma stories. People need to have the theory of trauma (generational developmental complex) before they are introduced to trauma healing skills.

What we did

• A blend of trauma theory and recovery practice – provides analysis of violence related trauma, resulting in alcohol and other drugs, suicides, homicides, domestic violence and child abuse as cause and effect.
  Tools used are:
  • Geno-trauma grams, Felt sense - lessons from nature
  • Activation, titration, resourcing and discharge
    providing capacity for understanding trauma across generations and tools for working with both individuals and groups.

What we learnt

• Aboriginal people got it! and could see what they could do for themselves. We saw multiple layers of trauma that individuals, families and communities can carry which creates complexity and the need to reemphasis safety and security and knew they had to do something. Through the trauma the other issues are clearly symptoms of the trauma and not separate from it.
Why we did what we did

• Violence is endemic within many Aboriginal families and communities. We wanted to give participants the opportunity to develop an action plan for themselves and their family/community.

What we did

• We created The Action Team of the Town of Everywhere, where each person/participant was invited to teach others about their knowledge of the different forms of violence within their town, while working together to put an action plan into place. The Action Team was based on learning through dialogue, with a belief that each participant had something to teach us all.

What we learnt

• Not to lock people into a feminist analysis of domestic violence, but allow participants to work in action planning for community recovery from a deep analysis of their own violence experiences/understanding. This provided people with a sense of self capacity and competency. The Action Plans were powerful in their application of knowledge into community action.
Men’s & Women’s Healing Recovery

- **Why we did what we did:** We found men and women needed their own healing program separate to each other.

- **What we did:** In reflective discussion and practice explores the traditional and contemporary issues that contribute to Aboriginal women’s and men’s lives today. Each woman or man was supported to bring her- his own healing practice to share with others.

- **What we learnt:** The historical experience of western women and men has been transferred to Aboriginal gender roles, and this combined with the historical trauma experiences has negative impacts on both men and women. Both groups welcomed the healing ceremonies they made as separate gender groups.

  - We found men developed a greater sense of responsibility in their growing awareness of the impacts of trauma, as a social construct in their lives. Men seemed more empowered to be responsible for themselves and their families.

© Artwork Chris Edwards Haines 2004
the Coolman holds the stories, you hold the space

Self Care
Making healing tracks across the nation

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