

NICOLA LESTER

BRONZE LEVEL:

Becoming Trauma Aware

NICOLA LESTER
PSYCHOLOGICAL TRAUMA CONSULTANCY

consultancy@nicolalester.co.uk

CONTENTS

CHAPTER ONE:

UNDERSTANDING TRAUMA AND LOSS

CHAPTER TWO:

THE COMPLEXITY OF DEVELOPMENTAL TRAUMA

CHAPTER THREE:

INTEGRATING A TRAUMA INFORMED APPROACH TO
PRACTICE



CHAPTER ONE:

**UNDERSTANDING
TRAUMA AND LOSS**



UNDERSTANDING TRAUMA AND LOSS

- Making a commitment to trauma informed practice first requires an understanding of how trauma influences and shapes the lives of those it touches.
- We must know how it can change, alter and transform the way someone thinks and feels; how they engage with and experience the world around them.
- Both this understanding and knowledge need to be integrated into our practice to allow us to extend care, compassion and the offer of connection.

DEFINITION OF TRAUMA:

'a wound; a hurt; a defeat'

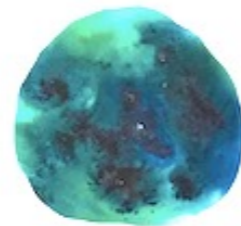
We are *not* our traumas.

They do not get to define us; who we are or who we become.

THE THEORY OF 'SHATTERED ASSUMPTIONS'

When we experience something as 'traumatic' it shatters our sense of safety and trust in the world around us and leaves us searching for answers.

Everything we thought we knew has changed.



THE THEORY OF 'SHATTERED ASSUMPTIONS'

"people ordinarily operate on the basis of unchallenged, unquestioned assumptions about themselves and the world"

Ronnie Janoff-Bulman, 1989, p.113

When someone experiences trauma, these assumptions are challenged, leaving survivors questioning, searching for clarity and with the task of recreating their view of themselves and the world around them.

THE THEORY OF 'SHATTERED ASSUMPTIONS'

Three basic assumptions:

1. The world is benevolent
2. The world is meaningful
3. We are worthy

UNDERSTANDING THE IMPACT OF TRAUMA

The way we think, the way we learn, the way we remember things, the way we feel about ourselves, the way we feel about other people, and the way we make sense of the world are all profoundly altered by traumatic experience.



UNDERSTANDING THE IMPACT OF TRAUMA

- Disorientation
- Difficulties concentrating
- Forgetfulness
- Easily overwhelmed
- Difficulties retaining and processing information
- Disengagement from support

THE IMPACT OF TRAUMA

"After a traumatic experience, the human system of self-preservation seems to go onto permanent alert, as if the danger might return at any moment."

Judith Lewis Herman (1992, p.35)



In this place of pure survival, there can be little capacity to think of anything else.

RESPONDING TO THE IMPACT OF TRAUMA

- Creativity
- Clarify and check
- Repeat and adjust
- Commitment

Trauma isolates, disempowers and disconnects.

Survivors are transported to a place of darkness which is characterised by this loneliness, sadness, fear, anger, guilt, shame, denial, and despair.

UNDERSTANDING THE IMPACT OF TRAUMA

- Intrusive thoughts and flashbacks
- Difficulties with and disturbed sleep
- Numbness and detachment
- Overwhelm and difficulties containing emotions
- Avoidance
- Disengagement
- Irritability and anger
- Hypervigilance

UNDERSTANDING TRAUMATIC BEREAVEMENT

- When bereavements occur under external traumatic circumstances they can lead to traumatic stress.
- Those who are bereaved are faced with the dual task of mourning the loss and coping with the trauma that accompanied the loss
- Trauma and grief are interwoven – meaning that someone experiences disconnection and isolation at a time of intense loss.

UNDERSTANDING ANGUISH

“Anguish is an almost unbearable and traumatic swirl of shock, incredulity, grief and powerlessness. Shock and incredulity can take our breath away, and grief and powerlessness often come for our hearts and our minds.”

“We are unable to change, reverse, or negotiate what has happened. And even in those situations where we can temporarily reroute anguish with to-do lists and tasks, it finds its way back in”

Brené Brown, Atlas of the Heart, p.91

UNDERSTANDING DEATH AND BEREAVEMENT

- Taboo subject, not openly discussed
- Fraught with judgement and assumptions
- Evokes uncertainty
- Creates inaction and avoidance

UNDERSTANDING COMPLICATED GRIEF

“Grief transforms. Grief changes you as few other experiences can...it strikes deep, unsettling, breaking apart, shattering what was once stable and secure”

Inge Del Rosario, (2004 p.19)

'GROWING AROUND GRIEF'

In the beginning there is only grief, it is all consuming, crowding out any capacity to experience hope, happiness, joy or colour in the life of those who are bereaved.



'GROWING AROUND GRIEF'



People think that grief slowly gets smaller with time as though healing from grief means that it is magically no longer there, disappearing from sight.

'GROWING AROUND GRIEF'

In fact, it doesn't ever get smaller, it remains the same shape and size, but slowly life begins to grow around it, you're bigger, stronger, brighter and more resilient, taking up more space around the grief as you reconnect with and rediscover things in life which give you joy, pleasure and happiness.



ADOPTING A TRAUMA INFORMED APPROACH TO WORKING WITH LOSS

- Integration of the loss
- Establishing a continued bond with the person who has died
- Honouring, memorialising and remembering
- Creating and recreating meaning

INTEGRATED GRIEF

“the enduring residual form of grief in which the reality and meaning of the death are gradually understood and the bereaved are able to embark one again on pleasurable and satisfying relationships and activities”.

The Loss Foundation

BARRIERS TO INTEGRATION OF LOSS

- Guilt
- The traumatic circumstances of the loss

THE THEORY OF CONTINUING BONDS

Grief is not resolved through detaching from the person who has died

Grief is resolved through creating new relationships and new ways of connecting with them.

These continued bonds can help someone to cope with the pain of their loss.

(Dennis Klass, Phyllis Silverman and Steven Nickman, 1996)

MEANING MAKING AND LOSS

Death can "undermine the basic storyline of our lives, launching an anguished attempt to make sense of what we have suffered and who we are in its wake"

Robert Neimeyer and Barbara Thompson, (p.4, 2013)

A central process in grieving is the need to "reaffirm or reconstruct a world of meaning that has been challenged by loss"

Neimeyer, (2001, 2016, p.66).

MEANING MAKING AND LOSS

1. The ability to process the event story of the death itself
2. The ability to access the back story of the relationship to the deceased in a manner which is 'healing'

Neimeyer and Thompson (2013)

MEANING MAKING AND LOSS: GUIDING QUESTIONS

- How can I recover or reconstruct a sustaining connection to my loved one that survives their physical death.
- Where and how do I hold my grief for my loved one in my body or my emotions, and how might this evolve into an inner bond of a healing kind?
- What memories of our relationship bring pain, guilt or sadness, and require some form of redress or reprieve now? How might this forgiveness be sought or given?
- What memories of our relationship bring joy, security or pride, and invite celebration and commemoration now? How can I review and relish these memories more often?
- What were my loved one's moments of greatness in life, and what do they say about his or her signature strengths or cherished qualities?
- What lessons about living or loving have I learned in the course of our shared lives? In the course of my bereavement?
- What would my loved one see in me that would give her or him confidence in my ability to survive this difficult period?
- What advice would my loved one have for me now, and how can I draw on his or her voice and wisdom in the future?
- Who in my life is most and least threatened by my ongoing bond with my loved one, and how can we make a safe space for this in our shared world?
- Who can help me keep my loved one's stories alive?

Neimeyer and Thompson (2013, p.5)

EXAMPLES OF MEANING MAKING IN PRACTICE

"It will always be there. I'll never get over it because you don't, but I just have a positivity about it. A positive pain, that's the only way I can explain. The pain of loss is energetic, not debilitating. I make it turn the other way. I make it do more things rather than less. From that moment when they told me that he had died, my life moved up a notch in energy and in ability and in openness, open to things. My life opened, it didn't close."

Bereaved father

EXAMPLES OF MEANING MAKING IN PRACTICE

“The day I told them that I was pregnant last summer, my mother in law immediately burst into tears absolutely delighted. ‘I’m going to be a nanny-in-law’. That’s what she said.”

Bereaved wife

TRAUMA INFORMED APPROACHES TO WORKING WITH TRAUMATIC LOSS

Whilst responses to grief are unique and distinct, what is universal is the desire for grief to be witnessed; someone who will remain present and bear witness to anguish, offer connection, and provide space for the process of storying the lives of those who have died and those who are left behind. The witness does not need to offer platitudes, minimise grief or lessen anguish; they need only be present; to do so says, 'I'm here and you are not alone'.

witnessing work in traumatic bereavement
can be a heart-breaking privilege.

we bear witness not just to grief and pain,
but also to love, the power of human
connection and the ways in which it
transcends all life.

CHAPTER TWO:

**THE COMPLEXITY OF
DEVELOPMENTAL TRAUMA**



UNDERSTANDING THE IMPACT OF COMPLEX TRAUMA

The UK Trauma Council defines complex trauma as traumatic experiences involving multiple events with interpersonal threats during childhood or adolescence.

Such events may include abuse, neglect, interpersonal violence, community violence, racism, discrimination and war.

(UK Trauma Council, 2022)



UNDERSTANDING COMPLEX TRAUMA

Many of the behaviours associated with developmental trauma are misunderstood by parents, caregivers and even professionals, meaning that children and young people are frequently labelled as 'naughty' or misdiagnosed with disorders such as ADHD or ADD.

Developing knowledge of the impact of complex trauma will allow us to withhold judgement, be curious, challenge assumptions, question practice and be creative in fostering connection and offering reconnection.

UNDERSTANDING COMPLEX TRAUMA

Professionals from Beacon House explain that when a child has been exposed to trauma, not only do they develop ways of coping which are often regarded as 'unhealthy' and 'maladaptive', they simply do not have the opportunity to develop essential skills of daily living such as being able to retain and process new information, manage their impulses or solve problems.

Instead, they live in the part of the brain which is responsible for their survival; all of their energy is focused on keeping themselves safe and there is no capacity for learning other skills.

Beacon House



UNDERSTANDING COMPLEX TRAUMA: BRAIN DEVELOPMENT

- To understand developmental trauma it is useful to think about how the brain develops.
- The brainstem or 'primitive' brain develops first
 - responsible for sensory, motor and survival skills.
- The 'limbic' brain develops next - responsible for attachment and emotional development.
 - Finally, the 'cortical' brain develops - responsible for thinking, learning, language and inhibition.



AREA OF IMPACT 1: SENSORY DEVELOPMENT

- When a young child is exposed to trauma very early in their lives, they may not have the language skills to make sense of their experiences.
- Their memories are 'sensory memories' - the body has stored these memories in their sensory systems.
- Traumatized children are stuck in 'fear mode' as they grow up. Their hyper-vigilance and sensitivity to danger is so strong it reduces their ability to filter out other sensory experiences (e.g. noises, sights, sounds and smells).
- Instead their sensory system becomes overloaded and overwhelmed causing them to find it difficult to regulate or contain their emotions.



AREA OF IMPACT 2: DISSOCIATION

- Is a survival mechanism.
- Can be useful when children are exposed to high levels of trauma and danger.
- Helps children (and adults) to cope by enabling them to detach or disconnect between the mind and the body.

However, even when not in danger, children may continue to dissociate and it can seem as though they are lacking in focus or not listening.



AREA OF IMPACT 3: PATTERNS OF ATTACHMENT

- Children who are exposed to trauma learn different strategies of attachment to prevent harm and danger or to keep a parent/caregiver as close as possible.
- These strategies are known as either 'insecure avoidant attachment' or 'insecure preoccupied attachment'



PATTERNS OF ATTACHMENT: INSECURE AVOIDANT ATTACHMENT

- Children learn very early on that showing their feelings triggers danger or causes the withdrawal of a parent/caregiver.
- They learn to hide their emotions and pretend that everything is okay.
- Inside they may feel vulnerable and frightened but they present themselves to the world as bright and confident and fine.



PATTERNS OF ATTACHMENT: INSECURE PRE-OCCUPIED ATTACHMENT

- Instead these children learn the importance of showing their feelings in order to get noticed and attract attention.
- They learn to exaggerate their behaviour and can appear angry, hostile, aggressive and disruptive, whilst on the inside they are actually feeling frightened, vulnerable and anxious.



AREA OF IMPACT 4: EMOTIONAL REGULATION

- Emotional regulation is a skill learnt in early childhood.
- When children are exposed to trauma, the part of the brain responsible for emotional regulation does not develop fully.
 - Instead it gets stuck in the 'toddler' phase
- We often think of these behaviours as 'attention seeking'.
- Instead we should think of them as 'attachment seeking'.
 - Difficulties regulating emotions can lead to unhealthy coping strategies (e.g. self-harm, drugs and alcohol).



AREA OF IMPACT 5: BEHAVIOURAL REGULATION

- Everyone has a 'window of tolerance' - when we are in our window of tolerance we can think and learn.
- When a child has been exposed to trauma their 'window of tolerance' is much narrower. This means that when there are increased demands made of them, even small ones, this can cause them to move quickly outside of this window of tolerance.
- This may trigger them to become over-aroused (flight and fight response) or under-aroused (when they shut down completely).



AREA OF IMPACT 6: COGNITION

Children who have experienced trauma struggle with under-developed cognitive skills which affect their ability to:

- plan for the future
- organise themselves
- learn from their mistakes

They are stuck in the 'limbic' part of the brain and use all of their energy to stay safe and work out if they can trust the people around them. This then limits their ability to develop other skills.



AREA OF IMPACT 7: SELF-CONCEPT AND IDENTITY DEVELOPMENT

- Children who have been exposed to trauma, particularly over a long period of time, are often left with a deep sense of being unlovable, bad and unwanted.
- This starts to be how they see themselves, no matter how much reassurance is given by those around them.
- This may create a vulnerability to exploitation and abuse in relationships.



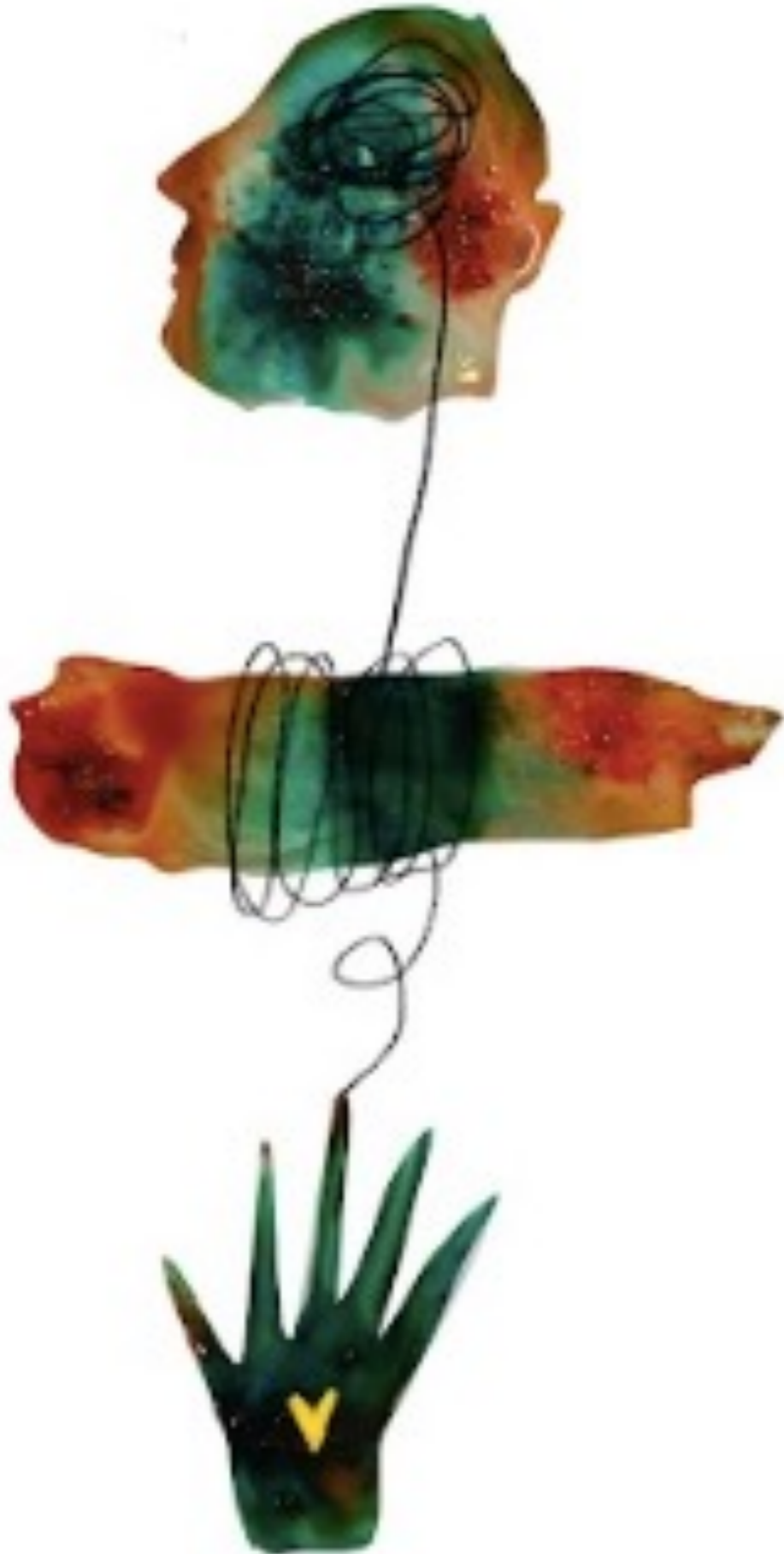
THE IMPACT OF COMPLEX TRAUMA

"..repeated trauma in childhood forms and deforms the personality. The child trapped in an abusive environment is faced with formidable tasks of adaptation. She must find a way to preserve a sense of trust in people who are untrustworthy, safety in a situation that is unsafe, control in a situation that is terrifyingly unpredictable, power in a situation of helplessness. Unable to care for or protect herself, she must compensate for the failures of adult care and protection with the only means at her disposal, an immature system of psychological defenses."

Judith Lewis Herman (1992, p.96)

TRAUMA INFORMED APPROACHES TO WORKING WITH COMPLEX TRAUMA

- Recognising 'wise adaptations'
- Understanding that 'deformity' can be repaired
- Relationships characterised by kindness, compassion, love and connection can heal.



TRAUMA INFORMED APPROACHES TO WORKING WITH COMPLEX TRAUMA

- Knowledge and understanding
- Commitment and creativity
- Recognising behaviours as 'convenient' or 'inconvenient' rather than 'good' or 'bad'



TRAUMA INFORMED APPROACHES TO WORKING WITH COMPLEX TRAUMA

- Personality disorder - shaming and blaming
- Focus on personality 'traits' rather than 'disorder'
- Reframing 'inconvenient behaviours as adaptative coping strategies

RECOGNISING COPING AND RESILIENCE

Combat skill	In combat	At home
Buddies	Cohesion – nobody understands your experience except your buddies who were there	Withdrawal Prefer to spend time with buddies Avoid speaking about self to family and friends
Accountability	Maintaining control of weapon and gear is necessary for survival	Controlling Become angry when someone moves or messes with your stuff, even if insignificant Nobody cares about doing things right except for you
Targeted aggression	Targeted aggression involves making split second decisions that are lethal in a highly ambiguous environment to keep you and your buddies safe	Inappropriate aggression Over-react to minor insults Irritability Assault Rage
Tactical awareness	Survival depends on being aware at all times of your surroundings and reacting immediately to sudden changes	Hypervigilance Feel constantly edgy or anxious
Lethally armed	Carrying a weapon was mandatory and necessary	Needing to have a weapon on you, in your car / home Believing you and your family are not safe without this
Emotional control	Controlling your emotions is critical for mission success	Anger / detachment Failing to display emotions, or only showing anger, around family and friends will hurt relationships
Mission Operational Security (OPSEC)	Talk about mission only with those who need to know Can only talk about combat experience with unit members	Secretiveness Avoid sharing deployment experiences with family and significant others
Individual responsibility	Your responsibility in combat is to survive and to keep your buddies alive	Guilt Feeling you failed those who were injured / killed Distress at memories Shame Survivor guilt
Non-defensive (combat) driving	Unpredictable, fast, rapid lane changes, straddling the middle line, keeping other vehicles at a distance designed to avoid IEDs	Aggressive driving Speeding tickets Accidents Road rage
Discipline and ordering	Survival depends on discipline and following orders	Conflict Inflexible interactions (ordering and demanding behaviours) with family and friends

(developed by the WRAIR Land Combat Study Team)

THE POWER OF REFRAMING: FROM

'When I am walking home at night I walk really fast and keep checking over my shoulder as I am fearful of being attacked. I feel weak and powerless.'



THE POWER OF REFRAMING: TO



'When I am walking home at night, I walk briskly and maintain a ritual of scanning the area around me so that I can monitor the threat level and respond to it quickly.'

When someone lacks a sense of self-worth, this ability to reveal 'what's right with them' can begin that process of repair.

ASKING 'WHAT'S RIGHT?': UNDERSTANDING SELF HARM AS COPING

When someone engages in self-harm, it may look to us as though they are not coping, but in fact, it is the opposite; they are coping in the best way they know how.

What appears to us to be harmful is helping to keep someone alive and safe, offering them a form of release from the intensity of their distress.

To not acknowledge this truth creates stigma, shame and secrecy which only grows the more we seek to stop or change their behaviour.

FROM ATTENTION SEEKING TO CONNECTION AND RECONNECTION

Behind every behaviour is a feeling which in turn masks a need; someone is trying to tell you something important about how they are making sense of the world around them.

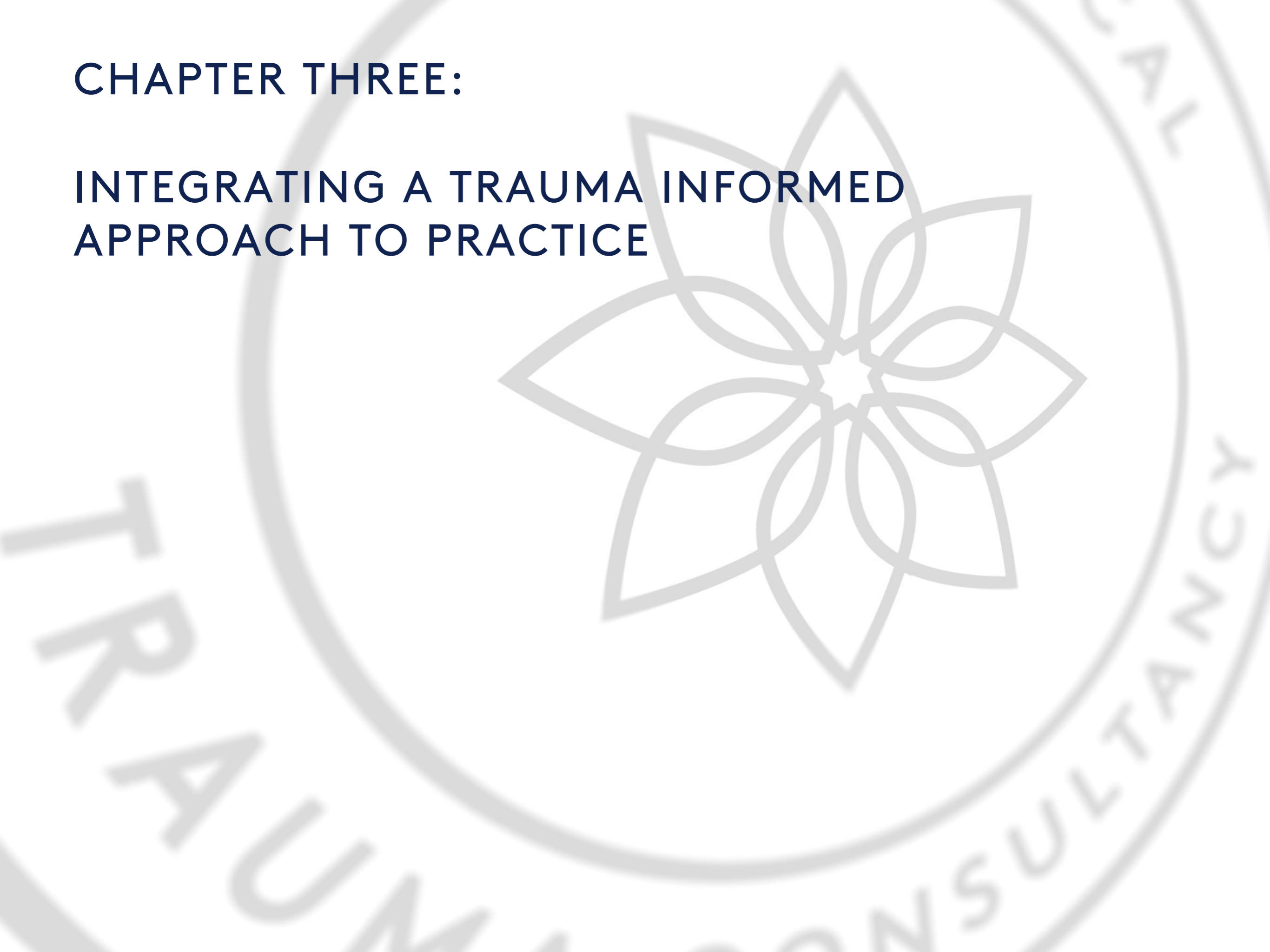
In trauma informed practice we must respond to this need by offering connection.

Responding to 'inconvenient' behaviour does not endorse or encourage it, rather it demonstrates that someone has been seen, heard and valued.

Extending connection in return may not be immediately transformative, but gradually, over time, it will repair, create healing and most importantly, remind someone that they are not alone.

CHAPTER THREE:

INTEGRATING A TRAUMA INFORMED APPROACH TO PRACTICE



Becoming 'trauma informed' need not be complex or opaque. What lies at the heart of a trauma informed approach is simply the ability to ask not what's wrong with someone or even what's happened to them. It is about asking 'what's right' with them instead; uncovering that which already exists so that it emerges from a place of darkness into the light where it can be examined, claimed and shared with the world.

Becoming 'trauma informed' is simply to be both 'human' and to extend that humanity to others through the offer of connection and reconnection.

It is a way of being, seeing, knowing and doing. Education and additional resources can enhance our approach, offering clear guidance and a pathway for integration into our work, yet we must not forget that it is our innate humanness and our desire to communicate this with others than creates the very foundation for this practice.

THE SIX KEY PRINCIPLES OF TRAUMA INFORMED PRACTICE

1. Establishing a sense of safety
2. Restoring choice and control
3. Supporting someone to cope
4. Facilitating connections
5. Responding to identity and context
6. Building their strengths

PRINCIPLE 1: SAFETY

Creating a space where someone feels heard, seen, cared for and valued.

PRINCIPLE 2: OFFERING CHOICES AND RESTORING CONTROL

Offering choice and supporting someone to realise that choice offers an opportunity to anchor, reorientate and empower.

In trauma informed practice, the roles of 'healer' and 'wounded' have no place. When we offer kindness, compassion, warmth and understanding, we do so from our position of sitting beside someone.

We must seek their preferences, listen to their perspectives, ask about their needs and pay attention to what they want. We must set aside our assumptions and prioritise their viewpoint over and above what we may judge that they need or what we ourselves feel the need to do for them when we bear witness to their distress.

OFFERING CHOICES AND RESTORING CONTROL

“The first principle of recovery is empowerment of the survivor. She must be the author and arbiter of her own recovery. Others may offer advice, support, assistance, affection, and care, but not cure.

Many benevolent and well-intentioned attempts to assist the survivor flounder because this basic principle of empowerment is not observed. No intervention that takes power away from the survivor can possibly foster her recovery, no matter how much it appears to be in her immediate best interest.”

Judith Lewis Herman (1992, p.133)

PRINCIPLE 3: SUPPORTING COPING

- Recognising 'wise' adaptations
- Uncovering 'what's right' with someone
- Understanding how someone is coping rather than how they are not



PRINCIPLE 4: FACILITATING CONNECTIONS

Connection can make what is otherwise unbearable, tolerable and prevent pain from becoming toxic and outside our reach.

Facilitating connections requires us to look beyond the person that we are working with and to see who else is there and what they can offer.

PRINCIPLE 5: RESPONDING TO IDENTITY AND CONTEXT

Accounting for identity and context does not require us to possess knowledge of every different culture, faith and set of circumstances that we may encounter. It simply asks that we pay attention to the assumptions that we make, withhold judgement, remain curious and seek to understand how someone is experiencing their world.

PRINCIPLE 6: BUILDING STRENGTHS

“We already have everything we need. There is no need for self-improvement. All these trips that we lay on ourselves – the heavy-duty fearing that we’re bad and hoping that we’re good, the identities that we so dearly cling to, the rage, the jealousy and the addictions of all kinds – never touch our basic wealth. They are like clouds that temporarily block the sun. But all the time our warmth and brilliance are right here. This is who we really are. We are one blink of an eye away from being fully awake.”

Pema Chödrön (1994, p.1)

Trauma informed practice it is not about fixing or changing. It is about the desire to sit with someone in their darkness, the commitment to create those flickers of light so that they know that you are there and they are not alone. It is the pledge to bear witness and remain present no matter how difficult it is to do so. It is the dedication to embark on a treasure hunt for those hidden jewels which exist in all of us so that they might be liberated and claimed.

PROTEST, RESISTANCE, DEFIANCE: UNDERSTANDING RESILIENCE

“No one escapes pain, fear and suffering. Yet from pain can come wisdom, from fear can come courage, from suffering can come strength-if we have the virtue of resilience”.

Eric Greitens (2016, p.3)



THE COMPONENTS OF RESILIENCE

- Self-awareness
- Self-care
- Mindfulness
- Social support
- Purpose



الدفاع المدني
مركز الأتصاري



**This is the place
This is the place you go to have a good time,
To have fun
And make memories
Although things have gone wrong
We have managed to stay strong**

**Our bees are buzzing and flying high
But our 22 angels are up in the sky.
The singers are still singing as we go to watch
Ours scars maybe weak
But we are not**

**We are strong, beautiful and fearless
Tears may fall
However we are still rising,
Rising high in the sky
With our 22 angels right by our side**



Poem by Yasmine, age 13.
Survivor of the Manchester Arena attack

THE COMPONENTS OF POST TRAUMATIC GROWTH

- **A greater appreciation of life.** Where the value of life is now understood and each day is cherished.
- **Improved relationships with others.** With family, friends and neighbours. You may experience a closer connection or bond, have increased compassion or simply know that in times of crisis and struggle, you will not be alone.
- **New possibilities:** the path out of darkness may paved with new interests or a new direction. For some this may include campaigning for change.
- **Personal strength:** the knowledge that you are stronger than you ever thought you could be.
- **Spiritual change:** Increased connection to faith and your beliefs.

Richard Tedeschi and Lawrence Calhoun (1996)

In this place of darkness, it is possible to gather strength, cultivate wisdom, generate learning and create meaning.

Even when we still can't see the way out, we must notice how far we have risen.

ACHIEVED



READING LIST

1. Resources from Beacon House: <https://beaconhouse.org.uk/resources/> *
2. Brené Brown (2021) Atlas of the Heart: Mapping Meaningful Connection and the Language of Human Experience Vermilion, London *
3. Ronnie Janoff-Bulman (1989) Assumptive worlds and the stress of traumatic events: applications of the schema construct Social Cognition 7 (2): 113-136
4. Pema Chödrön (1994) Start where you are: how to accept yourself and others Thorsons, London
5. Eric Greitens (2015) Resilience: Hard-won wisdom for living a better life Mariner Books, Boston
6. Judith Lewis Herman (1992) Trauma and Recovery: From domestic abuse to political terror Pandora, London
7. Dennis Klass, Phyllis Silverman and Steven Nickman (Eds) (1996) Continuing Bonds: New Understandings of Grief Routledge, New York
8. Kristin Neff (2021) Self-compassion: the proven power of being kind to yourself Yellow Kite, London
9. Robert Neimeyer and Barbara Thompson (2014) Meaning making and the art of grief therapy In book: Grief and the expressive arts: Practices for creating meaning. Edition: 1. Publisher: Routledge. Editors: B.E. Thompson, R.A. Neimeyer
10. Robert Neimeyer (2016) Meaning Reconstruction in the Wake of Loss: Evolution of a Research Program Behaviour Change 33 (2): 65-79
11. Philippa Perry (2019) The Book You Wish Your Parents Had Read (and Your Children Will be Glad That You Did) Penguin Life, UK
12. Inge Del Rosario (2004) A Journey into Grief Journal of Religion and Health, 43(1): 19-28
13. Richard Tedeschi and Lawrence Calhoun (1996) The Posttraumatic Growth Inventory: measuring the positive legacy of trauma Journal of Trauma Stress 9(3): 455-71.

CONTACT DETAILS

Nicola Lester

Mental Health Consultant

consultancy@nicolalester.co.uk

