



## Director's update

Welcome to Mental Note, the Psychological and Specialist Services (P&SS) Inaugural Quarterly Newsletter. As Belinda Edwards, Director of P&SS is currently acting in the Statewide Services ED position, I have the honour as Acting Director to present this first issue.

P&SS have been busy changing to a more flexible service delivery model in the current environment, where COVID-19 has limited our usual face-to-face delivery of psychological and allied health interventions. Psychologists are still available for consultation and referrals in all areas, however some consultations, interventions and assessments may take place remotely using online platforms, teleconferencing, messaging or written forms of communication. Whilst this represents a change in our usual service delivery, I believe it also represents an opportunity to expand our skills in responding flexibly and creatively to our clients. This is something that will enrich our practice when we return to more established modes of functioning. I've heard many stories of psychology work with children and families in this environment that are inspiring in their creativity. Many of our staff are having very positive feedback around their new modes of intervention!

In this issue you'll find some important resources and information to help you deal with COVID-19 – this includes keeping yourselves, and the families and young people we work with, both mentally and physically healthy.

LINKS Trauma Healing Service (LINKS), our team of multidisciplinary trauma specialists, is featured in this edition. The outcomes from our LINKS teams have been very positive, and there is external interest in modelling other trauma services from our service. We are very proud that DCJ is a leader in evidence-based trauma treatment, and achieves wonderful results for referred families. P&SS are fortunate to have an excellently trained and skilled workforce right across our districts as well. Psychologists in our district offices are trained in evidence-based trauma treatment as well as offering assessment, consultation and training services.

We also have some exciting news from the LINKS Training and Support team, formed by P&SS to address some of the findings of the Royal Commission. They have recently launched a website, and will be adding various resources in reference to their two main focuses – Trauma Informed Care and Problematic Sexualised Behaviour. Be sure to check it out.

I hope you find this newsletter helpful, and welcome your feedback. Working together is more important now than ever. Kind regards,

Cynthia Mifsud

### New trauma support website!

Have you heard about LINKS Training and Support? The team was established in 2019 to deliver on recommendations made by the Royal Commission into Institutional Responses to Child Sexual Abuse.

To improve the capacity of carers and caseworkers throughout NSW, LINKS Training and Support provides evidence-based training and resources in Trauma Informed Care and Problematic Sexualised Behaviour.

In exciting news, the team has just launched a brand new website! It's packed full of trauma-informed resources for carers and caseworkers including webinars, fact sheets and support services. And this is just the beginning!

Head to <http://LINKSSupport.dcj.nsw.gov.au> to visit the website. You can also email LINKS Training and Support for more information.

## Coping with a pandemic

As COVID-19 continues to spread, we must all adapt to new ways of living, working and caring. Both adults and children may experience heightened levels of anxiety as they adjust to this 'new normal'. If you're struggling, or you know someone who is, the following tips and strategies might be helpful.



### Children

Adults play a vital role in providing a safe, stable environment for children in their care. To help a child cope with anxiety around COVID-19, you can:

- Provide consistent and transparent communication with your child about COVID-19.
- Maintain normal routines such as sleeping, eating, studying and playtime.
- Make time for fun activities, hobbies and distractions.
- Maintain social connections via FaceTime, Skype or phone with friends and family.
- Monitor and limit your child's exposure to media about COVID-19.
- Teach your child the simple ways they can help – practice good hygiene and social distancing in a fun, practical way.

### Adults

As our normal routines and daily activities are further restricted, the things we once did to look after ourselves have become difficult to practice. Whether you're an essential frontline worker or isolating at home, you need to support your wellbeing.

- Stay attuned to your emotions, stress and anxiety.
- Keep things in perspective – try not to let negative thoughts take over.
- Continue engaging in supervision and professional development – this will help you provide consistent support to others.
- Limit your exposure to media coverage of COVID-19, and consult reliable sources such as [health.gov.au](http://health.gov.au).
- Practice self-care by maintaining your support network; making time for activities you enjoy; keeping healthy routines around diet, exercise and sleep; and practicing mindfulness or meditation.

You can also access the resources listed below.

## Helpful resources

### For Children

- Mind Heart Co: [My name is Coronavirus](#)
- Tumut Community Preschool: [The World Caught a Germ](#)

### For Adults

- Australian Psychological Society: [Maintaining your mental health during social isolation](#)
- Australian Psychological Society: [Tips for coping with coronavirus anxiety](#)

## Spotlight: LINKS Trauma Healing Service

### What is LINKS?

LINKS Trauma Healing Service (LINKS) delivers trauma focused, evidence-based support to children in out-of-home-care. The service seeks to decrease trauma symptoms, increase psychological wellbeing and improve behavioural and emotional functioning. There are two LINKS teams operating in Penrith and Newcastle, and a third is being established in the Illawarra.

### The LINKS difference

LINKS isn't just about psychology – it's about supporting children in a holistic way. Multidisciplinary teams include speech pathologists, occupational therapists, Aboriginal mental health clinicians and psychologists. The evidence-based interventions used by LINKS include:

- Trauma Focused Cognitive Behavioural Therapy (TF-CBT)
- Parent Child Interaction Therapy (PCIT)
- Eye Movement Desensitisation & Reprocessing (EMDR)
- Tuning into Kids/Tuning into Teens (TIK/T)

For more information on LINKS, or to make a referral, please email [LINKS@facss.nsw.gov.au](mailto:LINKS@facss.nsw.gov.au)

### Amazing results from LINKS!

In December 2019, the Parenting Research Centre released the second of three evaluation reports, indicating that LINKS programs have a positive impact on placement stability; post-traumatic stress; behavioural problems; emotional symptoms; social skills; and the personal wellbeing of carers.

Carers overwhelmingly agree that LINKS meets their expectations, and they would recommend the service to other families.

Given the remarkable success of LINKS since its launch in 2017, the program has received funding for a further 12 months!



## If only I could imagine...

**Karnage\* was 12 years old when he was referred to LINKS by his DCJ caseworker. He had difficulty regulating his emotions, and experienced significant anxiety around contact visits. Karnage also had diagnoses of Autism Spectrum Disorder and Attention Deficit Hyperactivity Disorder. This is his incredible story of transformation, as told by mental health clinician Libby.**

From the moment I met Karnage, I knew there was something special about him – a sense of resiliency, braveness, and motivation for growth and joy. These strengths shone through during his time with LINKS.

Karnage was removed from his mother's care in 2016, and spent 17 months in an alternate care arrangement (ACA). DCJ could not find a home-based placement to support him with his behaviours, which included physical and verbal aggression. In December 2017, Karnage was finally placed with foster carers Katie and Tom, where he has lived since.

When Karnage was referred to LINKS, we determined that Trauma-Focused Cognitive Behavioural Therapy (TF-CBT) was the best intervention to help him understand the physiological and psychological effects of his complex trauma.



During our last session together, Karnage chose to celebrate with a Mexican fiesta and plenty of his favourite food – tacos!

Karnage and I worked hard at learning relaxation strategies, increasing his emotional literacy, learning cognitive coping strategies (using our thoughts to regulate our feelings and shape our behaviour), creating a trauma narrative, and preparing for future challenges.

Karnage's spirit really shone when we created his trauma narrative, which he referred to as his 'life story'. It began with the words, 'I've been sad most of my life. I haven't once really had a good smile on my face.' Karnage titled his trauma narrative 'If only I could imagine'.

Karnage, like no other young person I'd worked with before, showed a deep desire and unwavering commitment to processing the traumas he had experienced in the past, and moving forward.

Several weeks later, when he was finally happy with it, he ended his life story with the words, 'I have lots of friends and family who love me. I feel happy and joyful, and I love my life'

Karnage's story highlights the strength and resiliency of our young people in OOH. As a clinician it was an absolute honour and privilege to have Karnage share his story with me, and to share in the joy of his progress.

\*Name changed to protect identity. When Libby sought permission to share Karnage's story, she asked what he would like to be called. He replied, 'Karnage! But it has to be with a K!'

## Trauma-focused cognitive behavioural therapy (TF-CBT)

Trauma-focused cognitive behavioral therapy (TF-CBT) is an evidence-based treatment approach that assists children and their parents or carers overcome trauma-related challenges.

TF-CBT focusses on assisting children to develop coping strategies for traumatic stress responses. It also seeks to reduce the incidence of depression, anxiety and challenging behaviours common in children who have experienced trauma.

A child participating in TF-CBT has the opportunity to talk about their experiences in a supportive environment, and develop a trauma narrative. In doing so, the child's brain starts to replace traumatic memories with more helpful thoughts about the trauma. Over time, reminders of trauma become less frequent and problematic for the child.

You can find more information about TF-CBT [here](#).

## Have you met...

### Angel Armstrong

Angel Armstrong works in the Penrith LINKS team as an Aboriginal Mental Health Clinician. She is currently completing her Masters in Forensic Psychology, with provisional registration.

#### What does your regular day at work entail?

I have only just started my Masters in Forensic Psychology, and started working for DCJ part-time about a month ago. Most of my time so far has gone into setting up, learning the ropes, training, attending meetings, getting in touch with Indigenous organisations and supervision. A typical day for me at the moment (considering the COVID-19 situation) is likely to start with reading through emails (this always takes about 30-45 minutes), online-training, supervision meetings, research into Indigenous Mental Health, and reaching out to carers/clients and their respective health professionals.

#### Tell us one positive experience you have encountered in the LINKS Trauma Healing Service?

I have worked in many different organisations, and have come across a range of different people, but I have never actually felt like I belong until now. People on the team are more than welcoming, and it is great being surrounded by people who share similar moral-ground and have amazing empathy skills. My managers are also very adamant about signing me up to training courses to expand my knowledge and prepare me for practice, which I am grateful for. I have amazing supervisors who are with me every step of the way. Overall, my experience since starting at LINKS has been nothing but positive.

#### What is your favourite part of the role?

My favourite part about my role is the fact that I will be making a difference in a child's life. Whether it be a small or large difficulty, it brings me peace knowing that I have tried my hardest to help a young person to flourish.

