

INCREASE TRAINING CURRICULUM

MODULE 4

Intellectual Output 2

created by the
INCREASE project partnership



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INCREASE Training Curriculum

Module 4

Innovation in social pedagogy, social work and youth work

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for youth workers in residential youth care and crisis intervention centres**

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MODULE 4: Innovation in social pedagogy, social work and youth work

Objective

Participants will acquire a basic understanding and improve skills in three main areas considered as innovative in the work in RYCHs:

- methods and tools to establish positive collaboration with parents, and in general with external persons, which was revealed to be a key aspect for maintaining the wellbeing of YPs in RYCHs and for their reintegration in the families (when possible),
- theoretical background of trauma pedagogy and use of its strategies in order to deal with and/or to prevent crisis situations in the RYCH
- attachment theory and relative methods of care of attachment disorders with a focus on adolescence

Content

The module provides an overview of three innovative aspects of the work in RYCHs:

1. The collaboration between RYCWs and parents and the methods for a basic assessment of the family characteristics, for the identification of risks factors and of empowerment opportunities, in order to plan a positive cooperation.
2. The trauma pedagogy approach, its methods and strategies for the management of crisis situations involving YPs who have experienced trauma
3. The attachment theory and its basic instruments for the analysis and the planning of activities addressed to YPs affected by attachment disorders.

Units

Unit 4.1	Innovative approaches in collaborating with parents	270'
Unit 4.2	Trauma pedagogy	270'
Unit 4.3	Attachment disorders	225'
Total Time		765'
ECVET Credits		0,75

Learning methods

Face-to-face learning (50%) and distance learning (50 %).

Assessment

The assessment of the learning outcomes will be divided in two parts:

Post-module assessment:

The five written open questions below, about the module contents and concerning a single case study.

1. Which strategies and methods can RYCWs use in order to promote and ensure cooperation with parents/families, refer to your own case study?
2. List three/four questions to be addressed to the parents/families to identify the risk factors and to assess the possible involvement in the case
3. Which are the causes of trauma in your own case study? Please identify the symptoms (if any) and describe the methods to approach the crisis situation
4. Refer to your own case study: which external professionals could you involve to solve the situation and which tools do you use to inform them about the situation (e.g. action plan, report). Please describe the chosen tool
5. Can you identify any attachment disorder in the case? If this would be the case, please describe how do you recognise the indicators and list some useful steps for an efficient action plan to deal with the problem

Practical basis for work with module/units - Case studies

Case study A / Unit 4.1 (group situation)

The crisis

In a RYCH three boys and four girls, between the ages of 15 and 17, have been living together for more than 5 years. All of them are enrolled in schools. The educators' shifts rotate every 8 hours. Besides Oszkar, one of the residents, being the victim of constant mockery and some small arguments about bathroom usage, TV programmes or homework, the atmosphere within the house was generally quite good.

One day, while washing up after dining with the girls, the RYCW became aware of loud shouts. A big fight was in progress between Oszkar and Adam. Eventually, Adam smashed Oszkar against the wall. The other residents had gathered around them and were urging them to end their fighting. However, the fight was so intense, that the RYCW couldn't intervene. In the end, another resident, Miklos managed to separate the two boys. Oszkar's nose was bleeding and he stormed out the house, he returned after he had calmed down. Meanwhile, the neighbour, who had overheard the loud fight, had called the police. When the police officers arrived ten minutes later they interviewed each of the residents privately.

The participants

Oszkar (boy, 17) was placed into RYCH after living together with his mother in a Roma community until the age of five. The mother has asked for child protection measures as she wasn't able to continue caring for him. After living in a RYCH, he was reintegrated in his family for a short period of time, but returned to the RYCH. He always had a stable relationship with his family. Moreover, he developed a romantic relationship with a Roma girl from his mother's

community and subsequently spent almost every weekend at his mother's house. It is certain that he quite often tried to emphasise his Roma identity, while provoking others. He criticised the food prepared in the RYCH as being unsuitable for Roma. He also mocked the others by commenting on their behaviour, their taste in music or the clothing they were wearing. He also called the other residents rude names. He was repeatedly beaten up by his classmates and by other boys from the neighbourhood. When reprimanded, he left the house, knowing that the educators would be held responsible for his absence.

Adam (boy, 17) was raised by foster parents since his birth to his Roma biological parents. His foster parent (social mother) had to terminate the youth welfare placement because of medical problems. However, after Adam was being accommodated in a RYCH, his foster parents continued to maintain contact with him, continued to provide guidance and had him over during holidays. Adam was in regular contact with a psychologist since childhood due to his violent outbursts when denied something. In these cases, he would hit the wall or vent his aggression by smashing objects.

Case study B / Unit 4.2 (individual situation)

Anna, a fourteen-year-old girl, lived in a residential youth care home (RYCH) since the local youth care authorities took her into custody seven years ago. She was extremely neglected by her parents and there were grounds to suspect physical maltreatment. One day the case suddenly escalated. Together with other residents and new residential youth care worker (RYCW), a professional newcomer, she visited the cinema. On their way home, one of the girls, Melanie, quickly overtook Anna. Anna stopped walking, in the middle of the street. She had tears in her eyes, started to breathe heavily and seemed to be afraid and confused. The RYCW tried calming her down. Unfortunately, Anna was not able to answer any questions; she only could either nod her head in approval or disapproval. On the way home, she seemed to be very puzzled. At the RYCH, Anna sank on the coach immediately, where she cried for a long time. She did not want to be touched or otherwise comforted by anybody. For an hour, she was unable to speak and she had an unfocused gaze. Afterwards, she fell asleep. The other inhabitants felt very uncomfortable and confused. Especially Melanie, who felt guilty, but did not know what she might have done wrong. The RYCW felt awful too as well as utter helplessness.

Case study C / Unit 4.3 (individual situation)

Giulia, aged fourteen, was born into a poor family. Her father was often absent and her mother struggled with chronic depression and low self-esteem. After the father definitively left the household, Giulia, her two brothers and her mother frequently moved to different dwellings because they were unable to pay the rent.

Her mother was frequently involved in prostitution. Giulia and her two brothers were left to fend for themselves while she went out and they frequently witnessed their mother having sex with strangers at home.

Giulia taken into social care when she was 11 years old because of behavioural problems at school, she had physically assaulted a teacher. By the age of 13 she lived in a Residential Youth Care Home because her mother could no longer take care of her and her brothers.

As adolescence emerged, the effects of years of neglect and inconsistent parenting became evident: Giulia often behaved aggressively and became totally disengaged from her peers. Her social interactions were marked by gaze aversion, unprovoked aggression, and an intense dislike of being touched. Her stay in the RYCH was characterised by escalating cruelty and violent behaviour towards her peers, the social workers and the educators. She also ran away frequently.

The last crisis was initiated due to one of her acts of cruelty. The social worker found her behind the building, standing frozen to the ground, next to a cat tortured by her. The animal's injuries were so grave they required surgery.

When Giulia became aware that the social worker caught her red handed, she ran away and had to be taken back to the RYCH by the police.

UNIT 4.1: Collaboration with parents as innovative approach

Objective

Participants will:

- *understand that family characteristics and pre-conditions are crucial factors in building a positive collaboration between parents and RYCWs*
- *get an insight in the necessary skills and competences for RYCWs to work efficiently with parents*
- *get acquainted with and try innovative methods, approaches and tools to assess family characteristics and to establish a positive collaboration with parents.*

ECVET Learning Outcomes

Knowledge

Participants can:

1. Describe successful networking and collaboration strategies for RYCW and parents
2. Explain methodologies of parental empowerment
3. Describe an overview of the legal requirements in regards with working with parents

Skills

Participants can:

1. Identify the risk factors of family/parents and recognise when the involvement of parents is necessary in the care plan of the YP
2. Carry out empowerment activities addressed to the parents of YP in RYCH

Competences

Participants can:

1. Apply the appropriate communication techniques, depending on the situation
2. Elaborate autonomously a collaboration plan involving the team and parents
3. Develop innovative approaches (e.g. activating families in their own strengths/educational resources, promoting external aids) to support parents in acquiring more self-esteem

Implementation Plan

4.1.1

General introduction

The trainer introduces the general outline of the unit and presents case study A, with a focus on the **relationships between the parents and the YPs**.

The description of the families' characteristics in the case study A is an introduction to the core of the module: collaboration with the parents in order to achieve positive outcomes for YPs in RYCHs.

Face to face
 Case study A
 PC and Video-projector
 Group discussion
 [25']

	The trainer asks the participants to describe some personal experiences in relation to the involvement of parents/families in the care/treatment of YPs in RYCHs.	
4.1.2	<p>Working with the parents: overview</p> <p>The trainer highlights the most important fields in terms of knowledge, skills and strategies in family engagement, with a focus on residential youth care contexts and intervention in crisis situation:</p> <ol style="list-style-type: none"> 1. Family characteristics and needed pre-conditions to build a positive collaboration between parents and RYCWs; 2. Innovative methods and tools to strengthen a positive collaboration with parents and to deal with crisis situations 3. Desirable skills and competences of RYCWs working with the parents. 	<p>Face to Face</p> <p>PPT Presentation M4-A01 (pp 2-6)</p> <p>PC and Video-projector</p> <p>[15']</p>
4.1.3	<p>1. Family characteristics and pre-conditions</p> <p>Trainer explains how the analysis of the family characteristics and pre-conditions represents an important step in assessing the situation and facilitating the relationship of the YPs in care.</p> <p>Findings suggest that, usually, youth residential care programmes have families with high levels of risk and low levels of parenting skills (1). "Family centred" approaches are always more frequent and requested in RYC contexts, in order to produce positive outcomes and to reintegrate in a better way YPs back to their family homes (when possible).</p> <p>The trainer introduces the participants to the first step of a family centred approach and lists the main areas for a complete analysis of family characteristics and roles:</p> <ol style="list-style-type: none"> youth variables relating to family (e.g., out-of-home placements, legal guardian), family risk (e.g., substance abuse, domestic violence, financial problems), parenting (e.g., participation of the family in important decision, adequate supervision, discipline, communication). 	<p>Face to Face</p> <p>PPT Presentation M4-A01 (pp 7-11)</p> <p>Lectures M4-A02, M4-A03</p> <p>PC and Video-projector</p> <p>Flipchart</p> <p>[25']</p>

¹ <http://www.tandfonline.com/doi/abs/10.1080/08865710902914283>

4.1.4

2. Innovative methods and tools to strengthen a positive collaboration with parents and to deal with a crisis situation

The trainer asks participants to come up with an example of crisis situation in which **difficulty** has arisen **between RYCWs and parents** for a group discussion.

After the group discussion, the trainer gives to each participant a paper (annex M4-A4) with a list of useful questions for the analysis of a crisis situation in the wider perspective of the collaboration with the parents. The trainer explains how to fill in it (the trainer can use the situation described in case study A as an example).

The participants are invited to answer the questions individually. They have to describe the relevant factors related to a crisis situation in which a difficult cooperation with parents has arisen.

After this individual work, the trainer collects the papers, splits participants into pairs and assigns randomly to each pair a "crisis situation" described on the papers. Each pair has to analyse the problems in the cooperation process and they have to propose solutions and strategies to solve the situation of difficult cooperation.

The trainer writes the findings on a flipchart, using keywords and connects the point of view of participants with:

- **problems and limits for working with parents** (regarding both sides: RYCSs and parents): e.g. parents are not cooperative, RYCW don't have the time to work with parents
- **different methods to work with parents** (e.g. to activate families on their own strengths/educational resources, promoting external aids).

Face to face

Group and individual work

M4-A04

Flipchart

[45']

4.1.5

3. Desirable skills and competences of RYCWs working with the parents

The trainer asks the participants to reflect about the skills they consider important for a RYCW working with parents. At the end of the discussion, the trainer suggests a list of some skills, competences and characteristics required for a positive collaboration:

- decision-making
- ability to work 'outside the box'

Face to face

Brainstorming

Flipchart

[25']

	<ul style="list-style-type: none"> • ability to challenge adults appropriately • ability to plan ahead • ability to stray from a pre-determined agenda • ability to use multiple approaches • ability to separate work and personal • ability to report back to the team • awareness of family boundaries • good facilitator of interactions • establishes relationships quickly • not easily intimidated • risk taker <p>At the end of the face to face session, the trainer presents the folders on the online learning platform, where the participants can find materials (and download it) about one of the main topics of the unit (family assessment) and specific contents aimed to offer a wider overview (legal framework).</p>	
<p>4.1.6</p>	<p>On the online learning platform, the participants will find additional reading documents on the analysis of family characteristics (Lectures M4-A2 and M4-A3).</p> <p>As conclusion to the unit, participants will have to develop tools (such as tables, questionnaires) for the purpose of analysing and assessing family characteristics in relation to the YP in RYCHs. The materials available online, (such as references, lectures and working models about the assessment of the family – M4-A1 pp 12-14) may be used as a model for the further elaboration of the tools.</p> <p>The participants will upload, in a specific folder of the platform, the tools they have elaborated, in order to share and to use them in their daily work in RYCHs to analyse and assess the family/parents characteristics of the YPs in care.</p>	<p>Distance learning</p> <p>M4-A01 (pp. 12-14)</p> <p>Lectures M4-A02, M4-A03</p> <p>PC and Internet connection</p> <p>[75']</p>
<p>4.1.7</p>	<p>Legal framework in working with parents</p> <p>The web platform provides additional reading, references and resources concerning international and national laws, regulations and legal requirements about collaboration between RYCWs and parents. In particular, participants will analyse the Convention on the Rights of Child (CRC) (M4-A5 and M4-A6) with</p>	<p>Distance Learning</p> <p>Power Point Presentation M4-A05</p> <p>Lectures M4-A06</p> <p>PC and Internet Connection</p>

<p>references to articles mentioning collaboration between parents and RYCWs.</p> <p>In order to have an overview of national legal frameworks the trainer invites the participants to read and analyse the materials online and to reflect on the way in which the national legislation adopts/implements the guidelines of the CRC on the collaboration between parents and RYCWs (M4-A5).</p>	[60']
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UNIT 4.2: Trauma pedagogy

Objective		
<p><i>Participants will:</i></p> <ul style="list-style-type: none"> • <i>acquire basic knowledge about traumatisation (definition, causes, symptoms and the connected developmental trauma disorders)</i> • <i>learn to be aware of the trauma and the resulting striking behaviour of the YP;</i> • <i>deal with and prevent crisis situations related to traumas</i> • <i>learn about the possible treatment of trauma and the working methods for RYCWs and other professionals involved in RYCHs.</i> 		
ECVET Learning Outcomes		
Knowledge	Skills	Competences
<p>Participants can:</p> <ol style="list-style-type: none"> 1. Describe a trauma (definition, formation conditions, effects and symptoms) 2. List the main characteristics and symptoms of traumatisation 3. Describe trauma pedagogy (definition, methods, communication skills, trauma pedagogic attitude) 4. Describe trauma pedagogical methods 5. Identify the role of external experts in emergency care 	<p>Participants can:</p> <ol style="list-style-type: none"> 1. Distinguish symptoms of traumas 2. Demonstrate the ability to use specific trauma pedagogical methods 3. Point out the appropriate expert to be contacted in case of a trauma 	<p>Participants can:</p> <ol style="list-style-type: none"> 1. Use trauma pedagogical conversation skills when evaluating the crisis/trauma severity of YPs and affected people 2. Develop an action plan in cases of crisis with YPs, using trauma pedagogic tools (laboratories and activities) 3. Proactively plan collaboration with appropriate external experts in order to deal with and/or to prevent crisis situations

	6. Know how the therapist deal with cases involving of traumas	
Implementation Plan		
4.2.1	<p>Pre-Introduction</p> <p>The unit begins by introducing participants to the psychological concept of trauma. During a distance learning session, the participants will deepen the topic of traumatology and its theoretical background with a focus on the following definitions and topics:</p> <ol style="list-style-type: none"> 1. What is a trauma? - Psychological definition 2. What is a complex trauma? 3. Formation conditions/Causes of trauma 4. Trauma related symptoms and behaviour <p>The web platform will be provided with a PPT Presentation (M4-A7) with quotes from the annexes (M4-A8, M4-A9, M4-10). Participants, according to their level of knowledge of the topic, may find new insights about the topic.</p>	<p>Distance learning</p> <p>PPT Presentation M4-A07</p> <p>Lectures M4-A08, M4-A9, M4-A10 are in English</p> <p>[30']</p>
4.2.2	<p>General introduction</p> <p>The trainer summarises the main topics of the previous distance learning session, introduces the class group to the general tasks of the unit and presents the case study B.</p>	<p>Face to face</p> <p>Case study B</p> <p>PC and Video-projector</p> <p>[30']</p>
4.2.3	<p>Group work on the case study B</p> <p>The trainer divides the participants in two groups, preferably formed by RYCWs with different educational backgrounds.</p> <p>The trainer asks to the first group to analyse the case study and list striking symptoms indicating a trauma in the story of Anna. (anamnesis-diagnosis)</p> <p>The second group has to list and describe on a paper the possible methods in order to approach the crisis situation of Anna (methods to react appropriately)</p> <p>After a group discussion, each group presents the elements they recognised as symptoms and present possible methods to deal with the situation. The trainer</p>	<p>Group work</p> <p>Flipchart, pens and papers</p> <p>[45']</p>

	<p>writes the two lists on the flipchart and invites the groups to match symptoms and methods to approach the situation.</p> <p>During the discussion, the trainer suggests new findings, matchings and elements that the groups didn't highlight (if any!)</p> <p>Through this activity the participants become more familiar with the contents of the unit and the trainer assesses the knowledge about the topic, in order to adjust the development of the unit.</p>	
<p>4.2.4</p>	<p>Trauma-pedagogical methods for the RYCW</p> <p>While referring to Case Study B, the trainer describes the symptoms of trauma experienced by Anna and focuses on dissociation: she had a flashback (a recurring, intensely vivid mental image of a past traumatic experience). Afterwards the trainer introduces the topic of the treatment: in this case the aim of a treatment may be to help Anna to refocus to the present time and to stop the dissociation and the flash-back.</p> <p>Helpful aspects to stop the dissociation moment could be talking, doing cognitive tasks (e.g. calculating) or physical distractions (e.g. bite into a lemon, hair tie around the wrist; see "emergency tool kit").</p>	<p>Face to face</p> <p>Case study B</p> <p>[30']</p>
<p>4.2.5</p>	<p>Trauma-pedagogical methods for the group: exercise</p> <p>Referring to the case described in the case study B, the trainer shows the "separating exercise" (experiential education), a useful trauma-pedagogical method aimed at helping to match particular feelings of the present to the developmental background.</p> <p>The trainer explains how the RYCWs should help Anna to figure out where her bad feelings are coming from by using questions and special accessories (e.g. a rope, two chairs, a heavy box). The rope lies in the room illustrating the border between the past and the present. The two chairs, one in the "area" of the past and the other one in the "area" of the present, can be used to enable Anna to switch between her memories and her actual emotions. The negative feelings of Anna can be represented by a heavy box. Anna can use this box to put her feelings inside and to transfer them to the past.</p>	<p>Face to face</p> <p>Group work</p> <p>Case study B</p> <p>A rope, two chairs, a box</p> <p>[30']</p>

	<p>Additionally, Melanie and her feelings could be also included into the exercise by the RYCW to make sure that no one blames Anna or Melanie for their feelings/behaviour etc.</p> <p>Afterwards, the trainer asks for feedback and invites participants to share similar crisis experiences or to give examples of application of the exercise in crisis situation or other case studies.</p>	
<p>4.2.6</p>	<p>Trauma pedagogy: theoretical background</p> <p>The web platform provides resources, materials and references on trauma pedagogy methods. The materials focus on the following topics and definitions:</p> <ul style="list-style-type: none"> • What is trauma pedagogy – definition • Methods of work for RYCWs and other professionals involved in RYCHs • Trauma pedagogy attitude • Difference between the work of a therapist and a RYCW <p>The selection of the training materials provided aims to offer a wide overview of trauma pedagogy methods and highlights the different roles and tasks of RYCWs and external professionals.</p> <p>If RYCWs are aware of tasks of therapists, psychologists and other external professionals, they could be more prepared to plan a proactive collaboration in dealing with crisis situations.</p> <p>After having studied the materials, participants have to elaborate a model of report where they describe a crisis situation (they can also use the case study B) and plan activities on the collaboration between the YP, the RYCW and the external professionals.</p> <p>At the end of the activity, they can share their collaboration plans with the group on the online forum discussion.</p>	<p>Distance learning</p> <p>Lecture M4-A08, M4-A11</p> <p>PC and Internet Connection</p> <p>[60']</p>
<p>4.2.7</p>	<p>Activities and methods to be developed in the long term</p> <p>The trainer gives some examples of workshops (e.g. art therapy, story-telling, etc.) that are also available as activities proposed in the guide provided on the online</p>	<p>Distance learning</p> <p>Lecture M4-A08</p> <p>[45']</p>

	<p>platform (with a focus on the activities for children under 12).</p> <p>After having studied the materials available on the online learning platform, participants have to develop a workshop for YPs between the age of 13 and 18.</p> <p>At the end of the activity they can share their workshop ideas with the group on the online forum discussion.</p>	
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UNIT 4.3: Attachment disorders

Objective		
<p><i>Participants will:</i></p> <ul style="list-style-type: none"> • <i>Gain an understanding on the possible causes of attachment disorders and its main symptoms</i> • <i>Elaborate an action plan in collaboration with external professionals for the care of YP affected by attachment disorders</i> • <i>Get an insight to the main theories of attachment</i> 		
ECVET Learning Outcomes		
Knowledge	Skills	Competences
<p>Participants can:</p> <ol style="list-style-type: none"> 1. Describe the main elements of attachment and attachment disorder theory 2. Give examples of common symptoms and effects of attachment and attachment disorders 3. Outline possible treatments for attachment disorders, with a particular focus on collaboration with external professionals 	<p>Participants can:</p> <ol style="list-style-type: none"> 1. Recognise signs and symptoms of attachment disorder in YP 2. Use different methodologies to approach cases of attachment disorder (e.g. use of thinking words, maintain communication with the family, eye contact) 3. Operate in an adequate manner with external professionals involved in care of YPs with attachment disorders 	<p>Participants can:</p> <ol style="list-style-type: none"> 1. Develop an action/helping plan in case of crisis for YPs with attachment disorders involving YPs, parents and external professionals (e.g. psychologists, legal guardians)
Implementation Plan		
4.3.1	Attachment: theoretical background	

	<p>To prepare the participants for the activities of the following face to face session, they're invited to download, read and analyse the materials provided on the web platform.</p> <p>The online resources (Power point presentation, videos on YouTube, references, articles, papers) will focus in detail on the following contents:</p> <ul style="list-style-type: none"> • Attachment theory and its evolution (Main, Bowlby, Ainsworth contributions) • Types of attachment • Meaning of attachment in childhood and adolescence • Different kinds of attachment disorders (e.g. RAD) • Formation conditions of attachment disorders • Symptoms 	<p>Distance learning</p> <p>Power Point Presentation M4-A12</p> <p>Lecture M4-A13</p> <p>PC, Internet Connection [55']</p>
<p>4.3.2</p>	<p>Introduction and preparatory activity</p> <p>The trainer summarises the main contents of the previous distance learning session, presents case study C and asks for feedback concerning the knowledge on the topic.</p> <p>Before the start of the class, the trainer places three flipchart papers in three corners of the classroom and after the presentation of the case study, writes on each paper three different questions:</p> <ol style="list-style-type: none"> 1. What are the causes of attachment disorders? 2. What are the symptoms of attachment in the crisis situation? 3. Could you propose some strategies or technique to approach this crisis situation? <p>The participants are divided in three groups and each group has to move from corner to corner to answer each question. The groups have 10 minutes to discuss about the case study and write their answers directly on the flipchart. Different coloured markers can be used for each group to see what they wrote for each question and which additional information or elements they have considered as relevant.</p> <p>At the end of the activity, the trainer comments, confirms or corrects the answers written by each group and writes them on the flipchart using a case report template following the structure below:</p>	<p>Face to face</p> <p>Group work</p> <p>Group discussion</p> <p>Flipchart</p> <p>At least three flipchart papers</p> <p>Coloured markers</p> <p>Lecture M4-A14</p> <p>[60']</p>

<p>Key elements of the case and of the crisis situation</p>	<p>Description of the individual background and context of the YP</p> <p>Description of the crisis situation</p> <p>List of the symptoms</p>	
<p>Action/Helping plan</p>	<p>Interventions provided by the RYCW in order to approach the crisis situation</p> <p>Suggestions and long-term intervention plan in collaboration with an external professional</p>	
<p>Afterwards the trainer presents the materials and resources on the web platform concerning the attachment theory and disorders.</p>		
<p>4.3.3</p>	<p>Final activity: development of an action plan in cases of crisis for YPs with attachment disorders</p> <p>The trainer instructs participants to apply an action plan in collaboration with external professionals (such as psychologists) for the care of YPs with attachment disorders. For the development of this activity, the involvement of an expert in the field of the treatment of attachment disorders should be an added value.</p> <p>The trainer lists the most recent attachment therapy methods and invites the participants to discuss on their application.</p>	<p>Face to face</p> <p>Group discussion</p> <p>Flipchart</p> <p>[50']</p>
<p>4.3.4</p>	<p>Assessment for entire Module 4</p> <p>Questions and work assignments: see the overview at the beginning of this module.</p>	<p>Distance learning</p> <p>[60']</p>

ANNEXES AND REFERENCES

M4-A1: Presentation Power Point "Working with the parents"

M4-A2: P. Kemp, et Al., Engaging Parents in Child Welfare Services: bridging family needs and child welfare mandates, 2009, Journal of the Child Welfare League of America, Inc. Vol. 88 (EN only)

M4-A3: Littell, Julia H., and Emiko A. Tajima, A Multilevel Model of Client Participation in Intensive Family Preservation Services, 2000, Social Service Review 74, pp. 405-435 (EN only)

M4-A4: Presentation Power Point "Innovative Methods and Tools – Form"

M4-A5: Presentation Power Point "Legal framework"

M4-A6: Convention on the Rights of Child (EN only)

M4-A7: Presentation Power Point "Theoretical background – traumatology"

M4-A8: Trauma Pedagogy, Guidelines for pedagogical first aid – Friends of Waldorf Education (EN only)

M4-A9: van der Kolk, B.A. 2005. Developmental trauma disorder: toward a rational diagnosis for children with complex trauma Histories, Psychiatric Annals (EN only)

M4-A10: D'Andrea W., Ford J., Stolbach B., Spinazzola J., Van der Kolk B.A, (2012). Understanding interpersonal trauma in children: why we need a developmentally appropriate trauma diagnosis, American Journal of Orthopsychiatry, Vol. 82, No. 2, 187–200 (EN only)

M4-A11: Table Trauma pedagogy attitude

M4-A12: Presentation Power Point "Attachment: Theoretical Background"

M4-A13: Bowlby J., A secure base, Parent-Child Attachment and Healthy Human Development, Basic Books, 1988 (EN only)

M4-A14: An open letter to educators who work with students who have been diagnosed with Reactive Attachment Disorder or have suffered early trauma, Carey McGinn Ed.D., CCC/SLP (EN only)

M4-A15: Assessment

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