

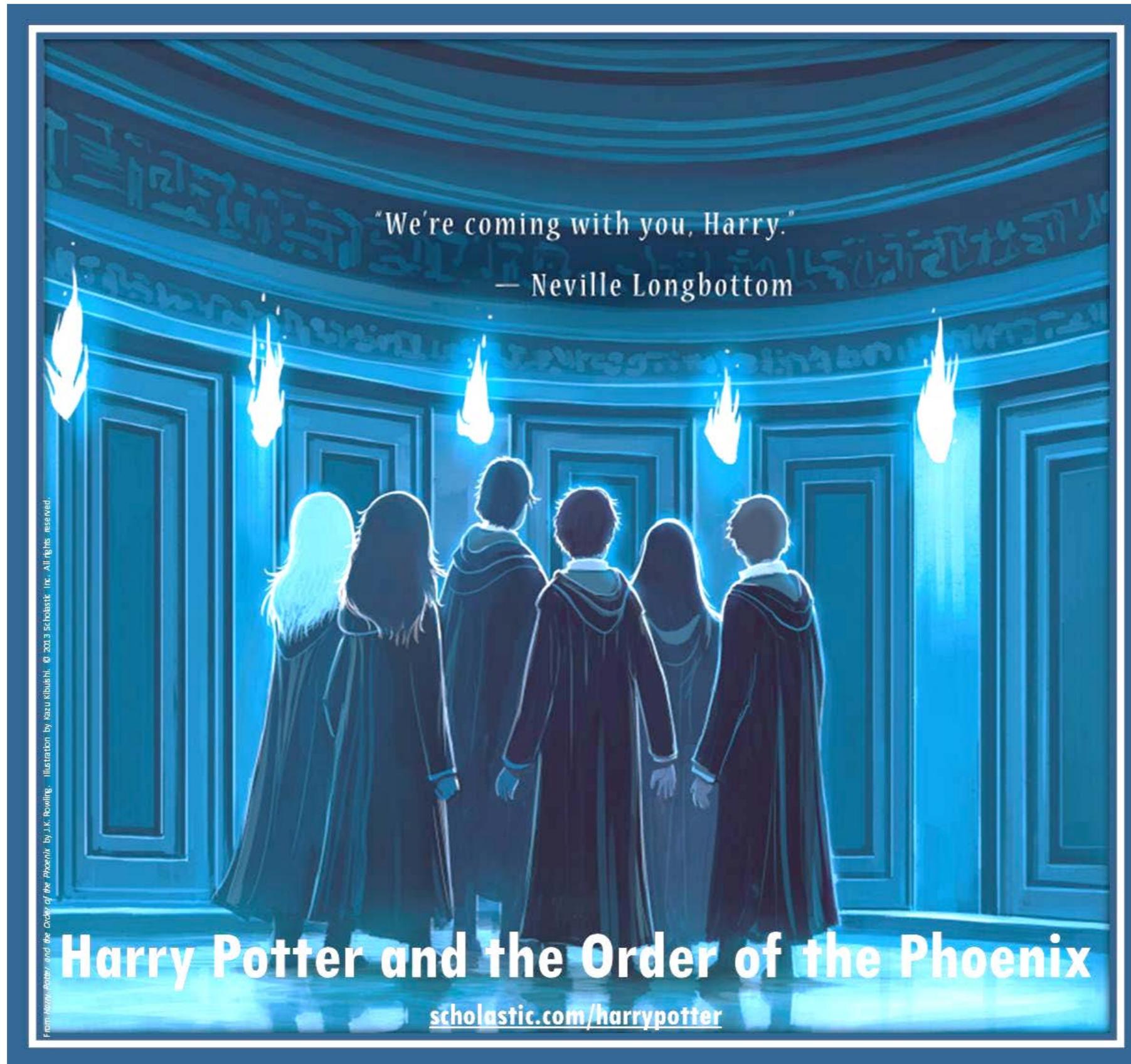


What
Harry Potter
Can Teach Us
About Supervising
Child Trauma
Therapists

Roy Van Tassell, M.S., LPC & Susan R. Schmidt, PhD
OUHSC Center on Child Abuse and Neglect

Lesson 1:

In the face of danger, we are stronger together.





A gift we give as therapists is to bear witness to children's trauma stories.

- Support your supervisee in taking on this important therapeutic role. This work changes us. Help it be for the better in your supervisee.
- Create a safe space for your supervisee to talk about the emotional impacts of this work.
- Foster your supervisee's "in the moment" stress coping skill set. Brian Miller's CE-CERT Model provides an active structure for reducing compassion fatigue.



HPDAILYQUOTY.TUMBLR.COM

*The fact that you can feel pain
like this is your greatest
strength.*

ALBUS DUMBLEDORE

HARRY POTTER AND THE ORDER OF THE PHOENIX



Lesson 2: Best to do it at a bit of a run if you're nervous.

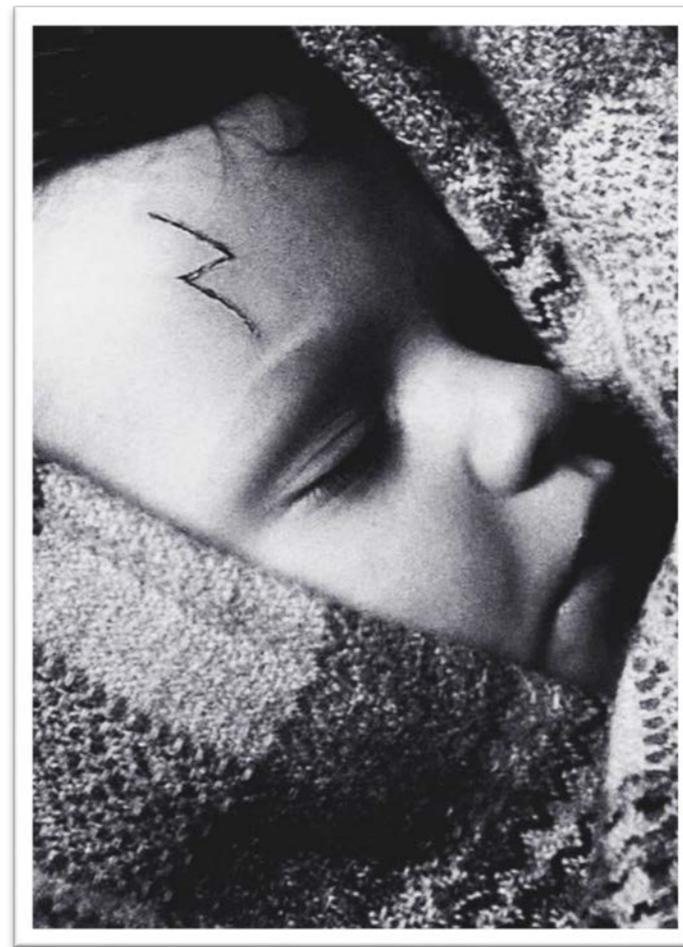
- New child trauma therapists may be hesitant to get started in trauma-focused work.
- But, there are many reasons that getting started may be beneficial to therapeutic rapport development and family engagement.
- Families respond to therapist confidence.



Encourage your supervisee to get going in child trauma treatment.

- Help supervisees learn why session structure is our friend in child trauma treatment.
- Make session activities fun and engaging for youth and families.
 - Incorporate session structure, agendas, etc. to foster a sense of safety/consistency.
 - Include praise, rewards, home activities to encourage participation.
 - Incorporate games, popular media (cartoons, movies, internet).
 - Include combined parent-child activities.

Lesson 3: The love of a caregiver is a magical force during the darkest of times.



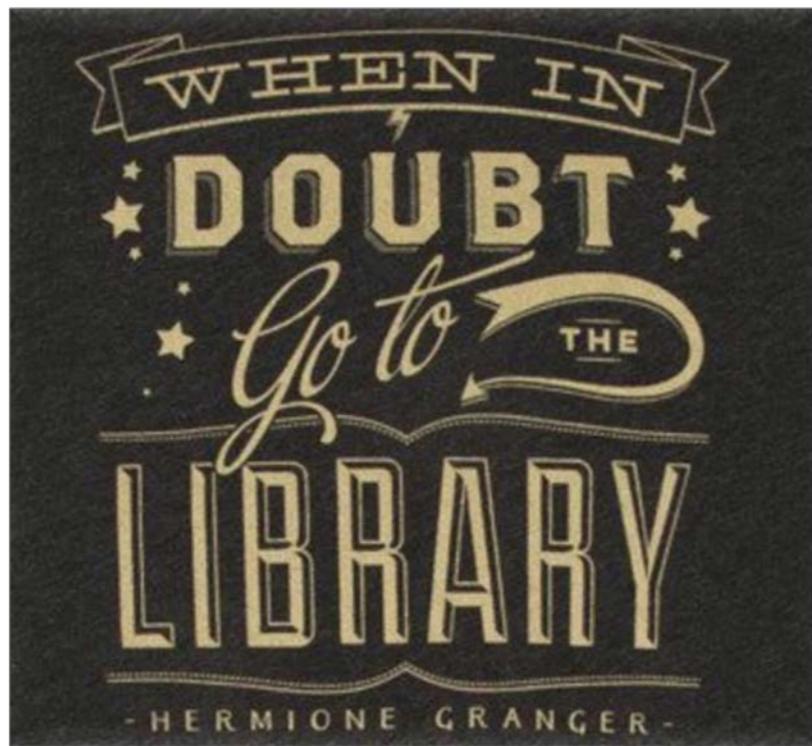
- Engaging caregivers in child trauma treatment can be tough, but can result in powerful healing for the youth and family.
- Research across the top child trauma treatment models show that children have better therapy outcomes when parents are actively and consistently involved in treatment.



Help your supervisee bring caregivers into treatment.

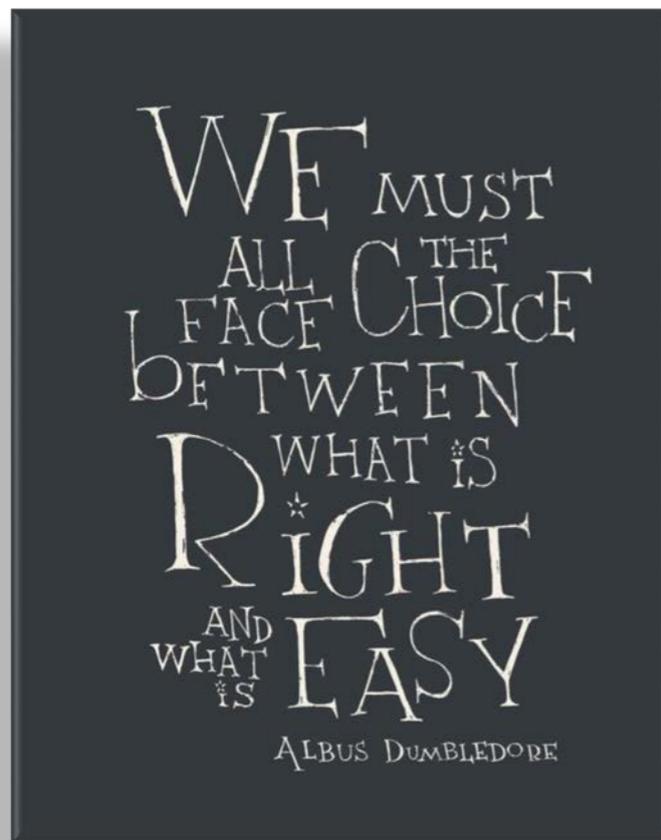
Ask your supervisee:

- Who are the key adults who can support the youth through treatment?
- What is the unique voice/gift/role each caregiver brings to the youth's healing process?
- What are some creative ways you might invite absent caregivers into the treatment process? How can the caregiver attending sessions help with this?
- In your next session, how can you incorporate the caregiver(s) into a portion of the session content?
- What homework can you assign for the family that will include youth-caregiver interaction?



Lesson 4: When the path is unclear, seek out the experts.

- Normalize that this is hard work and we can all get overwhelmed with what our families bring to treatment.
- When progress falters or stalls through the treatment components, explore potential reasons in supervision.
- Help supervisees learn that shift away from a treatment model framework should be the exception, not the norm.
- Straying from the model without a clear plan may get them lost.



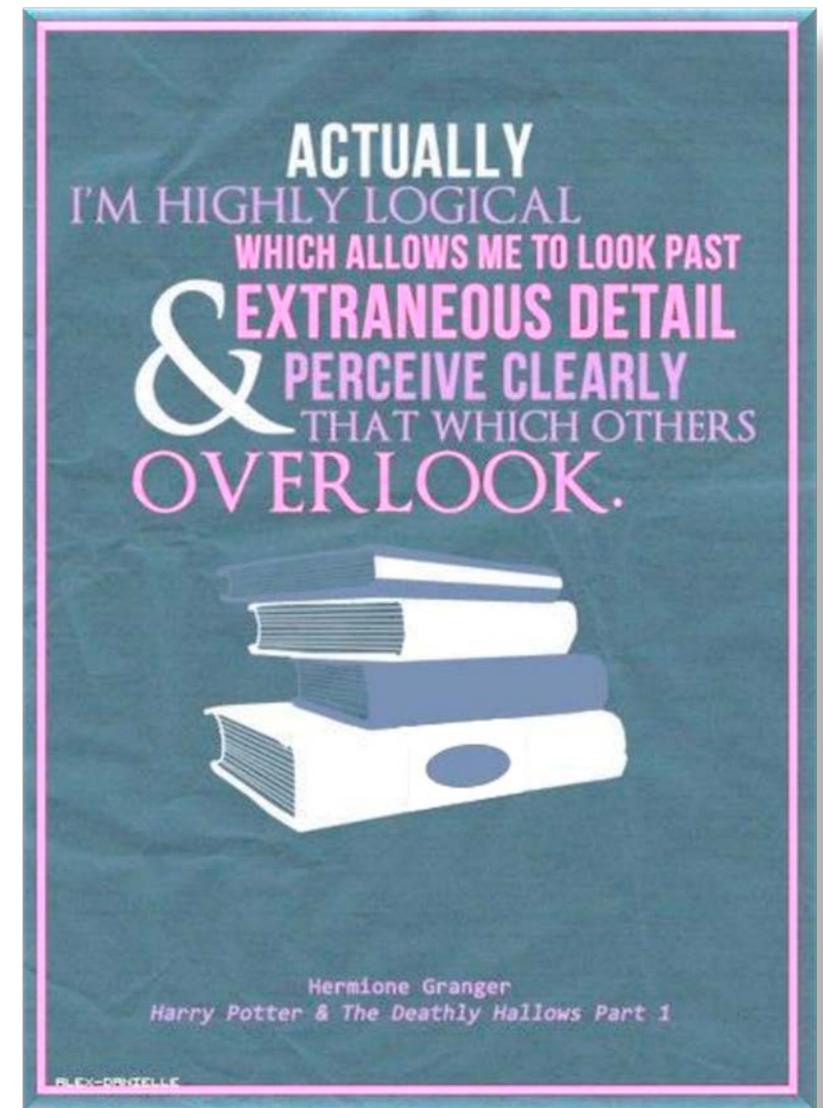
Supervisee drift away from the treatment model is the easy choice.

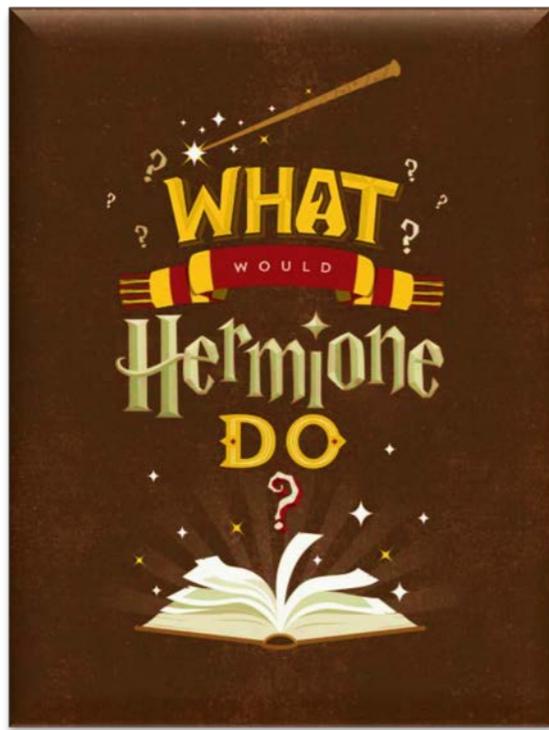
- Help your supervisee access their available resources.
- Does the model have a fidelity tracking form? If so, pull it out in supervision and let it guide the way.
- Encourage them to refer back to the manual, ppt, book, web training.
- Are there model consultants/trainers/developers who can field a question? We're happy to help.

Lesson 5: Let logic be your guide to avoid extraneous detail.

- Families may come into sessions with a LOT of extraneous details.

- Overattending to COWS (Crises of the Week) diminishes treatment gains. Clients may feel immediate relief, but they don't learn skills for reducing and managing future stressors.





Help your supervisee channel their Inner Hermione

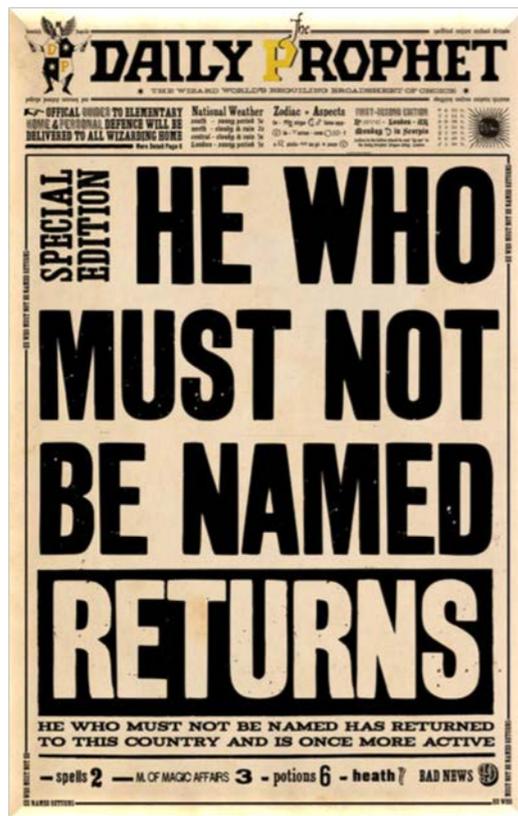
Assist your supervisee in maintaining their focus on treatment model progression.

- Assess the immediacy of the stressor.
 - Safety risk? Major life upheaval? Attend to as needed in session.
 - Chronic interactional pattern? Corral the COWS. Allot a set time in session to discuss COWS.
- Incorporate and practice coping skills when addressing the client's current stressors.

Lesson 6

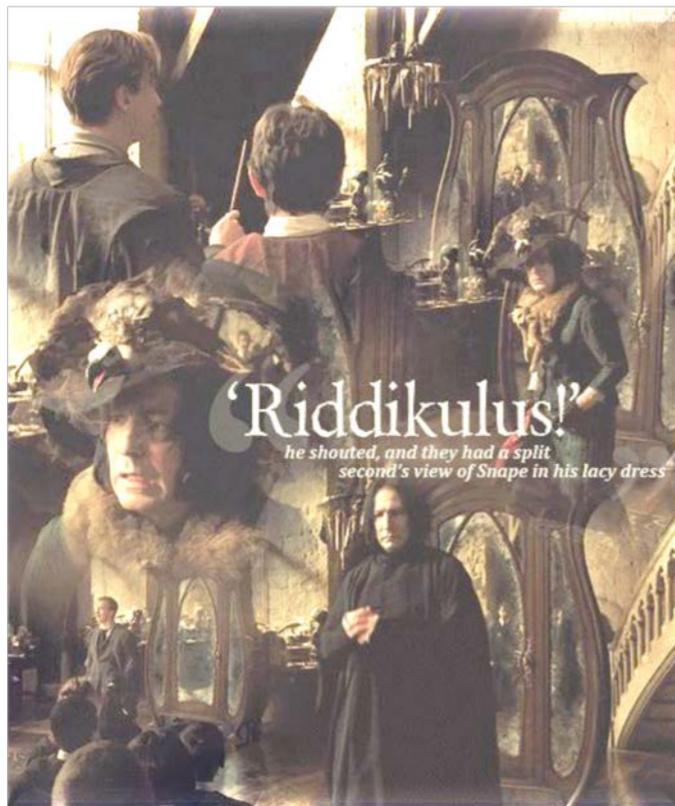
Call him Voldemort, Harry.
Always use the proper name for
things. Fear of a name increases
fear of the thing itself.

J K Rowling



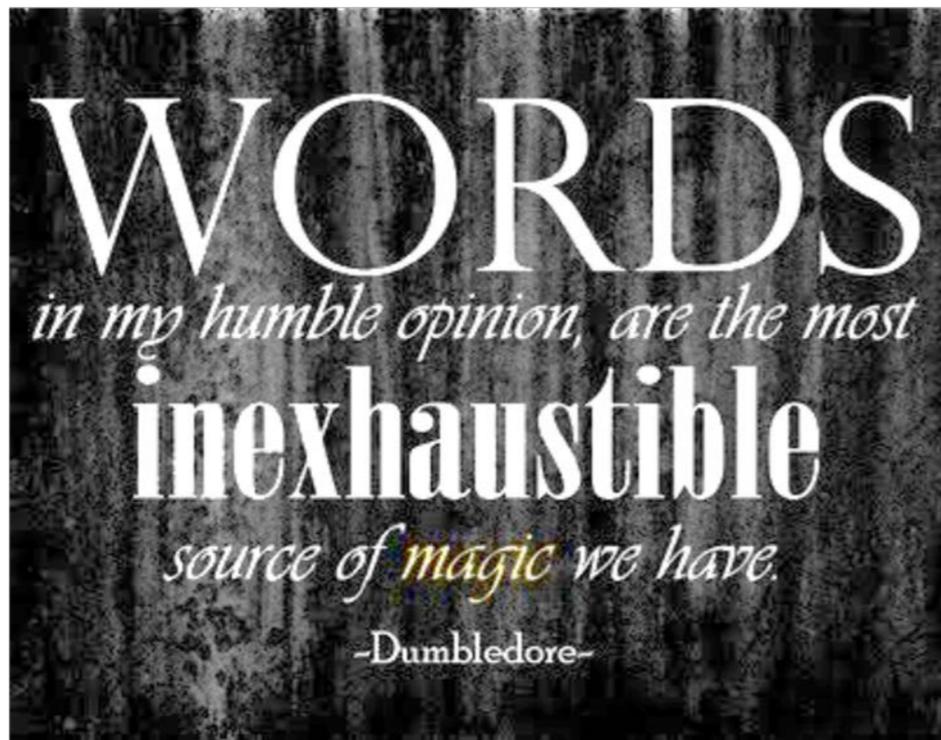
Fear of a name increases fear of the thing itself.

- New child trauma therapists may be hesitant to incorporate gradual exposure into each phase of treatment for fear of distressing youth and families.
- Research consistently shows that children with high avoidance and re-experiencing PTSD symptoms strongly benefit from gradual exposure to reduce trauma memory distress.



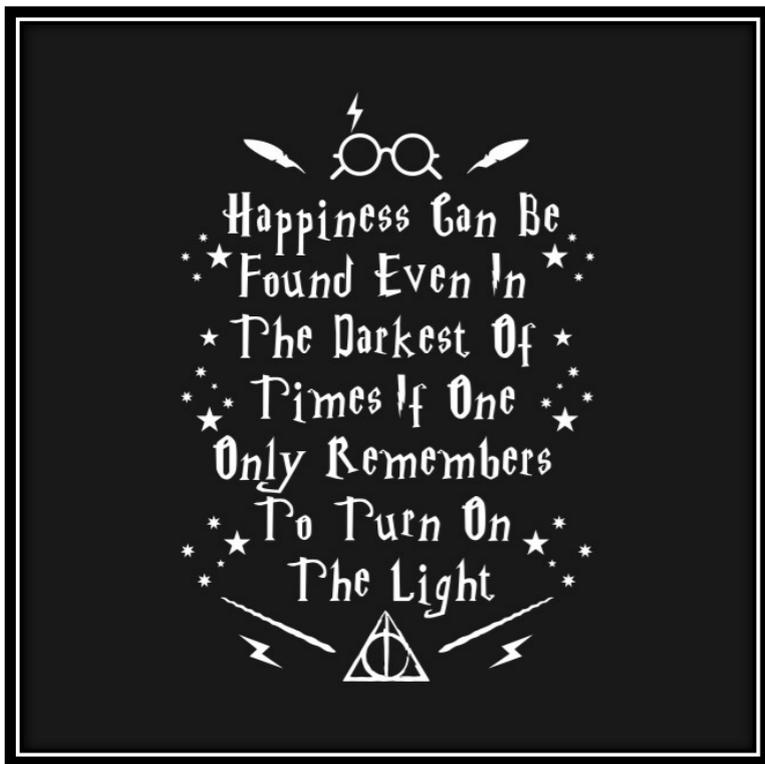
Support supervisees in planning how to incorporate gradual exposure into each treatment session.

- This is done in a safe and manageable way by pairing with relaxation skills, feelings ID/scaling, breaking up into small sections of each session, and ending with fun, grounding activities.
- In TF-CBT, this increasingly prepares youth and their caregivers for moving into the Trauma Narrative.



Lesson 7:
Words are capable of
both inflicting injury
AND remedying it.

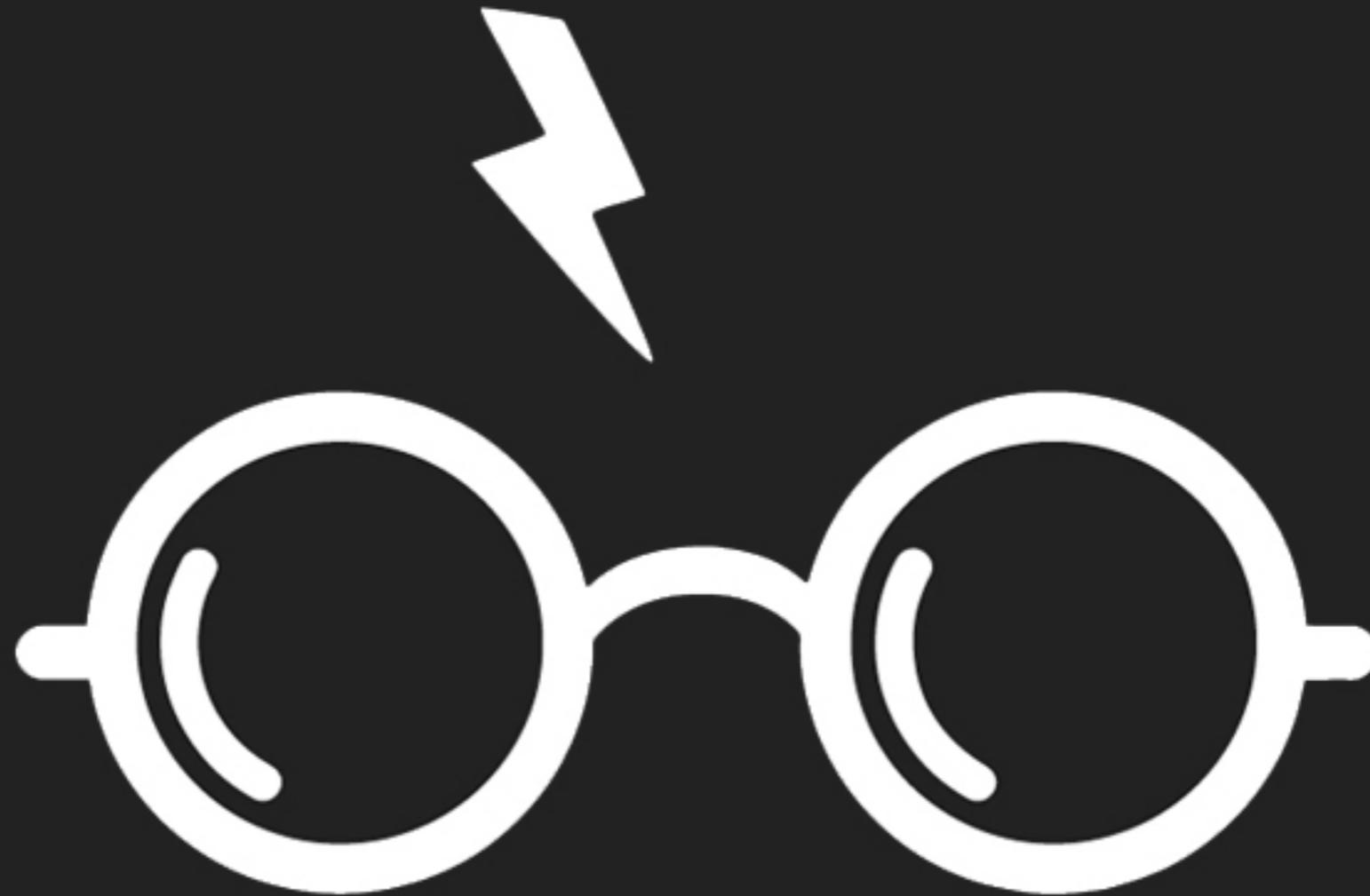
- It is the norm for new child trauma therapists to feel anxious about reviewing the child's trauma memories. They haven't yet witnessed the power of narrative to heal.
- Use the safety of supervision to invite supervisees to verbalize their hesitations and questions.



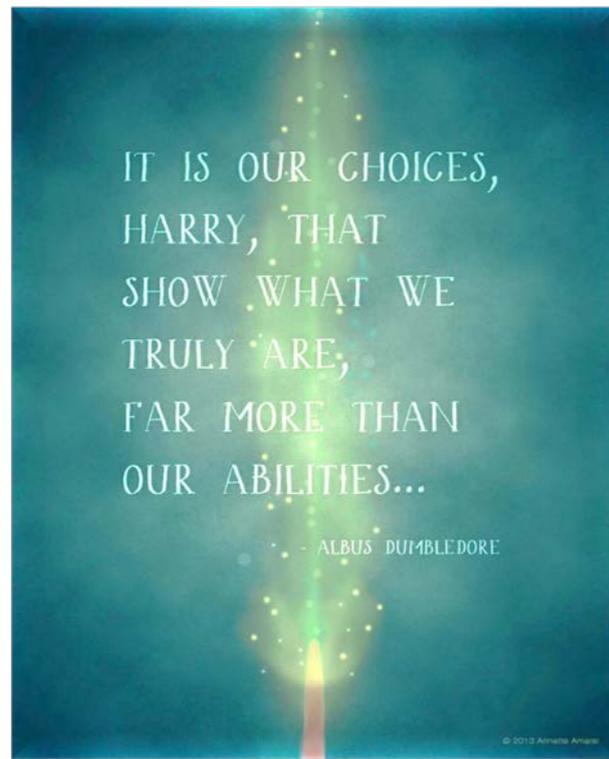
TF-CBT Specific: Help supervisees plan out each step of the Trauma Narrative process

- Who will be involved, when to start, how to prepare caregiver(s)?
- How will the TN be introduced to the child and caregivers?
- Using chapter format or other method? How will it be recorded (e.g., writing, typing, etc.)?
- What might the child's avoidance look like and ideas for managing it in session?
- What type of caregiver exposure work will be needed?
- Don't forget conjoint sharing preparation...

Lesson 8

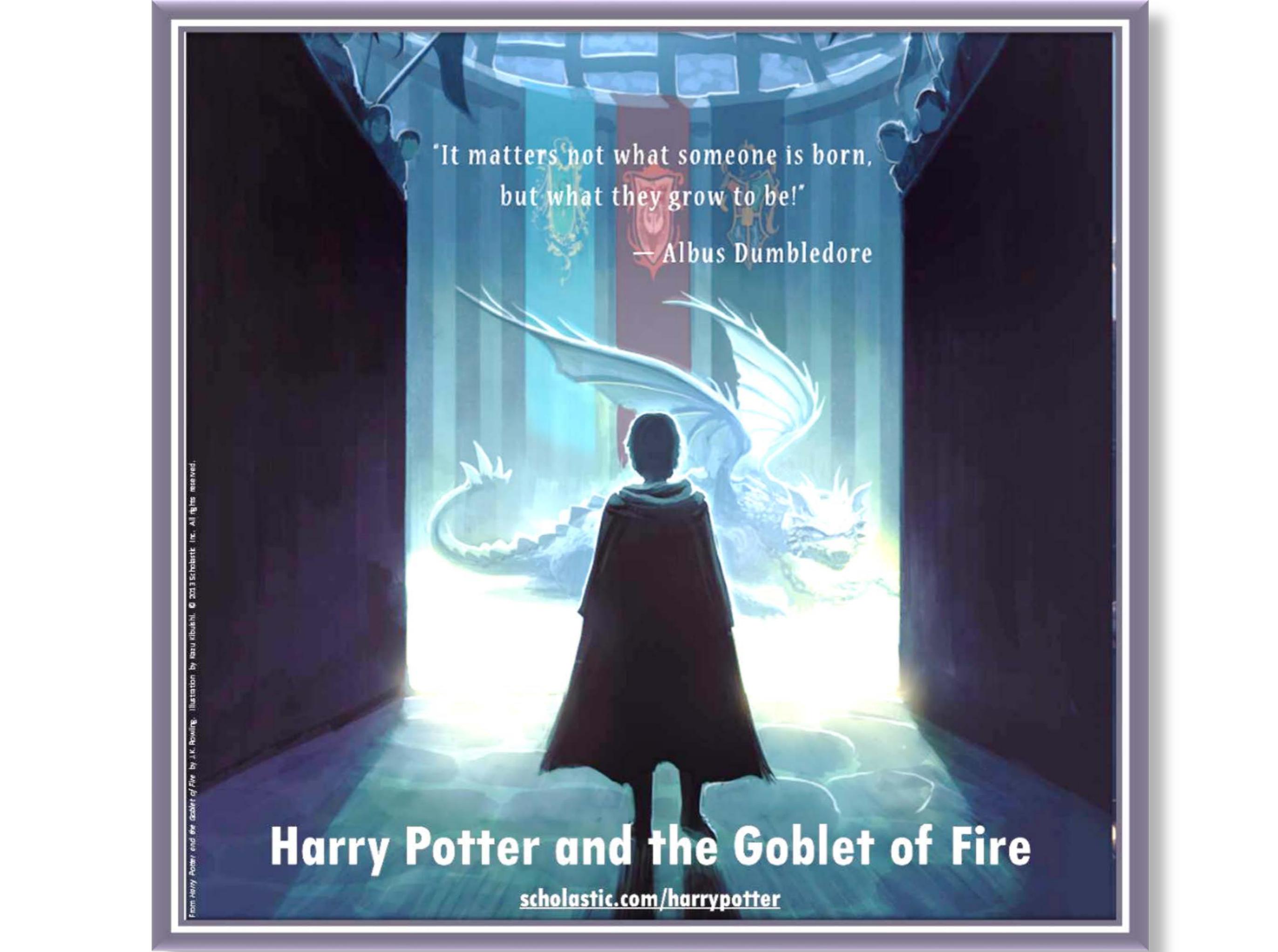


**“The world isn't split into good people and Death Eaters.
We've all got both light and dark inside us.
What matters is the part we choose to act on.
That's who we really are.”**



What's important is how we grow and make meaning from even the darkest times in our lives.

- Cognitive processing of trauma-related beliefs is a critical step in helping youth AND CAREGIVERS understand and make meaning of their traumatic experiences.
- In supervision, map out a plan for child, caregiver, and conjoint cognitive processing sessions. This is a great opportunity for role playing with your supervisee.

An illustration of Harry Potter standing in a circular arena, looking at a large, glowing dragon. The arena has a red and white striped background with crests. The scene is lit with a warm, golden light.

"It matters not what someone is born,
but what they grow to be!"

— Albus Dumbledore

Harry Potter and the Goblet of Fire

scholastic.com/harrypotter



You want to increase our billable hours to *what?!*

Lesson #9

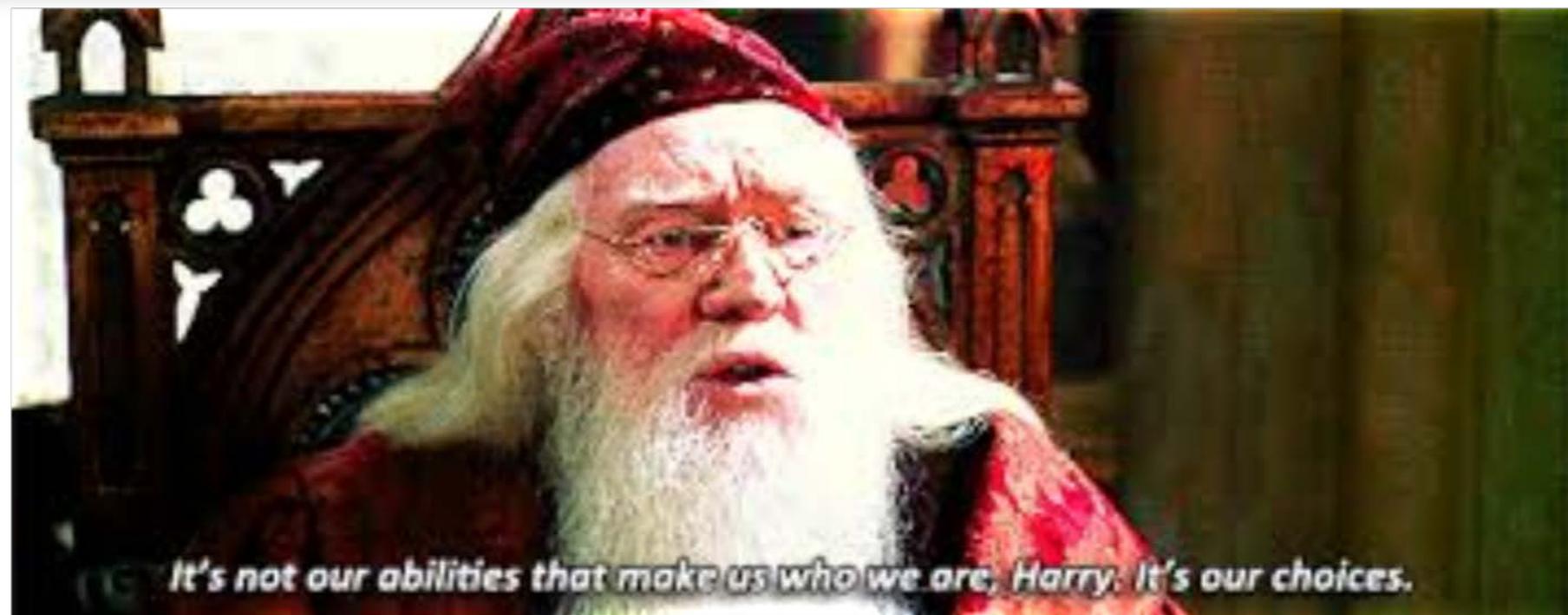
There is no such thing as a perfect organization or system!

- New therapists may have idealistic views of agency or child-helping field.
- A source of secondary stress and key aspect of burnout can come through admin and organizational issues.
- All of the skills from CE-CERT directly apply to work place related stressors.

Are there dilemmas for those who you supervise both clinically and administratively?



What are examples of some of these potential stuck places?



Questions?





Mischief

Managed.