



Iceberg Model trauma-informed guide

Understanding and supporting transitions

Introduction

Transitions are times or processes of change for children and young people in care. Just like any change, transitions involve uncertainty and feelings of insecurity and apprehension. Some of the commonly experienced transitions for children and young people in care are placement changes, school changes and transitions from care when they turn 18 years of age.

Children and young people who have experienced harm and neglect often struggle with transitions and may actively resist them.

Tip of the iceberg (what we can see)

Children and young people who are overwhelmed by the idea of another change might become distressed, sad, angry and aggressive, try to refuse to transition, become defiant or argumentative, have a tantrum or 'meltdown' or become withdrawn and disconnected.

During these transitional periods, children might demonstrate a variety of behaviours such as:

- difficulty separating from caregivers
- regression to previous developmental stages and needs (for example, toileting challenges, wanting to be fed or assisted again or seeking out lots of cuddles and physical contact)
- increased self-soothing behaviours (rocking, carrying around special objects, thumb sucking or stroking hair)
- seeking reassurance about what is going to happen and wanting the information repeated frequently
- seeking out verbal or physical affection
- withdrawing and being less affectionate than usual
- anger, sadness, guilt or blame
- escalation in existing trauma-related behaviours (for example, 'meltdowns,' aggressive behaviour at-risk behaviours or offending)
- sleep disturbance (for example, difficulties going to sleep, staying asleep or nightmares)
- talking about or acting out previous separations or trauma experiences in play.

What is happening underneath the surface?

Factors which make transitions particularly challenging for children and young people can include:

Internal working models

Internal working models are a set of beliefs that children and young people develop based on their experiences. Relationships with caregivers strongly influence whether a child or young person will develop a positive or negative internal working model. Children and young people who experience consistently loving and nurturing care develop beliefs that they are good, capable and worthy of love and care. Through their interactions with their caregivers, they learn that relationships are satisfying and dependable, and that the world is generally a safe and predictable place. Children and young people apply their internal working models to new relationships and experiences. Given this, children and young people with positive internal working models approach new situations and relationships confident in the knowledge that they are likeable and worthy and that relationships are supportive and worthwhile.

Conversely, children and young people who have been harmed by previous caregivers can develop negative internal working models. It is important to understand that in the absence of other explanations that may be too complex for them to understand, children and young people often blame themselves for the harm they have experienced and begin to feel that they are bad and deserve to be hurt. When caregivers behave in ways that they are unavailable, unpredictable, or frightening in their interactions with the child or young person or if they struggle to understand what the child or young person needs, the child or young person can develop a negative working model where they believe:

I am.... bad, not good enough or unworthy

Relationships are..... unavailable, undependable, or scary

The world is..... unpredictable, unsafe confusing.

Children and young people in care may have had less consistent access to a safe and nurturing attachment figure to help them throughout any transitions. This may lead to self-blame for why past transitions have occurred (children or young people might believe *"it's because of me. If I had been good, it wouldn't have happened"*). Children and young people may also have negative beliefs about their feelings and capacity to cope (*"I will just 'lose it', there's nothing anyone can do"*) or have unresolved grief about past losses that makes future transitions more scary (*"my caregiver dropping me off at respite makes me think about when mum left and didn't come back"*) or (*"it's only a matter of time until they send me away. I won't be safe here. Things can change at any time so I always have to be prepared. There isn't any point getting to know these people"*).

Children and young people's internal working models can be changed if they are provided with safe, predictable and nurturing care later in life but the process often takes a long time. It is hard for children and young people to let go of beliefs that helped to keep them safe even if they are no longer helpful.

Children and young people are developmentally vulnerable

Coping well with transitions requires the cognitive skill to understand the situation and why it is happening, future planning skills to be able to picture how things will be once the change has happened and emotional regulation skills to cope with a mixture of strong feelings which may raise throughout the process. Many children or young people do not have these skills because they are too young, have developmental delays, have additional needs related to neurodiversity or did not

have the opportunity to learn these skills from a safe, responsive adult during their early childhood. Children and young people experiencing transitions are dependent on support from their caregivers and care team to help cope with the changes.

Children and young people's transition support needs may increase where they have a history of multiple changes or needs related to cultural or linguistic diversity, neurodiversity or attachment (such as being in an active stage of attachment development or having developed a healthy attachment to the existing caregivers).

Due to their increased vulnerability, infants and young children have higher needs during times of transition. It is important to carefully consider and address any developmental and attachment-based needs within the transition plan.

The child or young person has experienced a lot of change

Children and young people in care often go through a large number of transitions including:

- being removed from their family
- placement changes
- respite care or changes associated with being in a shared care arrangement
- changes of case worker
- changes of child care centres or schools
- reunification attempts
- leaving care at the age of 18 years and having fewer social supports.

Children and young people in care go through multiple changes in their care and living arrangements. Each new placement brings with it many changes, including new caregivers, physical environment rules, other children and young people in placement, bed time routines, food and schools. This is a lot for any child or young person to manage. Transitions and change disrupt predictability, and frequent changes robs children of an opportunity to settle and feel safe.

The child or young person may have lacked support during transitions in the past

For many children and young people in care, transitions may have happened with little to no preparation or insufficient explanation for why they are happening. They may have moved houses or changed schools, and important people may have come and gone from their lives without sufficient narrative to make sense of why this happened. There may not have been anyone available to model healthy ways of engaging with transitions or to provide the child or young person with compassionate emotional support. There may have been limited to no opportunity for children to express their views about the change. These experiences often leave children and young people ill-prepared for future changes and with unresolved grief and loss about the past changes.

The child or young person is struggling with shame, rejection, and abandonment

Transitions often bring up big feelings for children or young people in care. There may be unresolved grief and loss about previous changes in their caregiving relationships or feelings of failure, rejection and abandonment about the current change that is happening. It is important to know that these feelings come from the child or young person's attempts to make sense of their past experiences; they are not personal and will often arise even if the transition is objectively a positive change.

The child or young person may struggle with big feelings

Major transitions such as change of school, ending a relationship and changes in care environment bring big feelings for children and young people in care as they feel uncertainty, confusion, lack of control and sometimes anger about the changes. During these times, children and young people may feel irritable, less energetic and more emotional than usual. Transitions are hard for children and young people if they have not had effective coaching and role modelling on how to respond to feelings in healthy way.

Strategies to promote healing

Avoid /minimise unnecessary transitions

Transitions should be kept minimal for children and young people in care. For example, careful consideration should be given to any change of childcare centres or schools unless absolutely necessary. Ensuring the child or young person has the same daily routine and using similar language in communicating may help the child or young person to feel less anxious. A child or young person's trauma experiences and their need for stability and predictability, should all be considered when considering a change. The timing of changes should also be considered carefully. For example, if a child or young person requires a placement change, it may be better to delay changing schools (where possible) or changing contact arrangements to allow the child or young person the opportunity to settle in their new placement without the additional complexities of navigating a new school.

Attention should also be paid to smaller transitions such as activities during a day or week. Some children and young people will struggle to complete a day of school and then cope with a transition to a sport training or other activity. While transitioning to high school is difficult for many young people, the requirement to move between teachers and classrooms many times during a day may mean that young people in care will require a school to attempt to minimise the changes or to provide other additional support.

Prepare the child or young person for change

Children and young people often manage change more successfully if they are given adequate information and warning and know what to expect. Use of simple, straightforward language to explain what is going to happen and when it will occur can be helpful. This information may need to be repeated several times and/or reminders may need to be given at intervals which are appropriate for the child or young person's developmental needs. For example, before going to respite care, let the child or young person know when they will be going (perhaps by showing them on a calendar), how long they will stay there and who will be there, and when they will be collected. It might also be helpful to talk about what will happen when they return. Some children and young people will require support to manage smaller changes such as moving between home and school, or going on an outing. Again, providing the child or young person with clear information about what will happen before, during and after a transition will support their coping.

Help the child or young person get a sense of new people or places

If the child or young person is approaching a change which will introduce a new person or place (for example, a new school, teacher or respite caregivers), it is helpful to offer them as much information as possible about the new context. For example, if it is a new location, visit the new location if possible. If school transitions have been difficult for the child or young person in the past, ask the school if you can visit to show the child or young person where their classroom will be, where they

should hang up their bag and where the playground is. Alternatively, draw a map together of the new place showing the places they might need to go. If it is a new person, see whether they would be willing to send their photograph or a short introductory video for the child or young person to watch. This does not have to be lengthy or detailed -just being able to see a person's face and hear what their voice sounds like is likely to have a beneficial impact on the child or young person's capacity to cope with a change.

Give a narrative to the child or young person about what is happening

Children and young people tend to blame themselves for transitions in their lives. By offering them a narrative which makes sense of what is happening, the sense of blame can be minimised. It is important to explain to the child or young person what the transition is and why it will be happening along with focusing on how the transition supports their safety, learning or other needs. It should be made clear the child or young person as to who the decision maker is (often DCP or their caregiver) with clear message that the transition is not happening because of something that they have done wrong. For example, *"You will be going to a new school after the holidays. This is because DCP and I have decided that this new place has some special activities which are better for you than where you were going before. Nobody is mad at you and you are not being sent away. We are just trying to choose things that will help you grow up as strong and healthy as can be."*

Reassure the child or young person about the things that will stay the same

Explore with the care team what existing routines can stay the same despite the transition and share this information with the child or young person. For example, if the child or young person is starting a new school, it might be helpful to keep their activities the same. Or if the child or young person is seeing a new professional, keep the routine of getting an ice cream together after the appointment the same. If a child is entering a new placement, it is important to identify the personal and important belongings such as toys, bedding and clothing the child or young person will be able to take with them to the new placement. Seeking the views of the child or young person about things which are especially important to them will assist in planning and this information should be shared with the care team.

It can also be helpful to identify aspects of a change environment that will stay the same. For example, talk about how the before school routine will remain the same, the caregiver will continue to drop them at school and recess and lunch will be at about the same time. See how many points of familiarity can be found and help the child or young person to do the same by answering their questions about the change.

It is also important to consider who the safe and significant relationships and service providers are in the child or young person's life, and to maintain these where possible. This will be particularly important in the initial stages of a transition and will help the child or young person to not feel so isolated. These relationships and service providers could include family members and siblings, other children the child or young person has lived with and significant service providers.

Give clear information about future roles

For placement changes, it is important for children and young people to understand what role existing or previous caregivers will have in their life in their future. Exploring and sharing this information with the care team to ensure everyone has a shared understanding is important. The child or young person will benefit from receiving clear information about what future contact will involve regarding the existing/previous caregiver.

If there is not going to be future contact it is also important to be clear about this with the child or young person. It may be helpful to assist the child or young person to understand that they will remain a special person in the previous caregiver's memory and that they will think about them. One way of offering some connection in the absence of future contact is talking about mutually enjoyable or meaningful activities the child or young person and previous caregiver have done together and how this can continue to support a connection. For example, say *"I remember how much fun we had eating chips in the car that day when it rained when we were at the beach. Whenever I have chips, I will think of you"* or *"I remember how much you love X show. Whenever I hear the theme song, I will think of you."* It is important for these memories to be positive and affectionate so that any feelings of shame or rejection are not enflamed.

Offer compassionate understanding and listening

Children and young people have fears or worries about transitions and it is helpful to be able to share these with a kind, emotionally supportive person. Even if the specific transition they are struggling with is difficult for the caregiver to relate to, empathising and reflecting on how difficult it is for the child or young person to go through change is often helpful. Caregivers can also help the child or young person to recognise that transitions can be the start of something good. Caregivers should also expect and allow for more reassurance and repetition of connection moments across transition.

Using active listening skills will help the child or young person feel heard. There are many ways to demonstrate active listening including fully attending to the child or young person by turning off televisions or putting phones down, keeping body language open and relaxed, and focusing on what they are saying (rather than how you are going to reply). It is important to slow down and give the child or young person plenty of time to express themselves. Active listening also includes summarising what has been understood so far or asking questions to deepen understanding. For children or young people who struggle to express themselves in words, it can be helpful to use *"I wonder"* statements to explore their feelings and beliefs. For example, say *"I wonder if you're feeling worried about what it will be like to live in a new house"* or *"I wonder if you're feeling sad that you won't live in the same house as X anymore."* This curiosity about what is going on for children and young people will help show them that their experiences matter. It is important to accept anything the child or young person shares without judgment.

Use transitional objects

It is often helpful for the child or young person to take a special object with them to help them feel connected and safe. This might be a favourite toy, a comfort item, or something that reminds them of the caregiver or placement. This is particularly useful for transitions such as a placement change, going to child care or respite care. It is important to choose an object which is appropriate for the environment and which the child or young person is likely to be able to keep safe and in close proximity. For older children, something like a button sewn into their pocket or an inexpensive but meaningful watch or bracelet might be a good choice.

For placement changes, it is also important to update the child or young person's life story book with information about the previous and new placements. This might include photographs of the placements and caregivers and a written narrative about significant information, events or memories. It may be helpful for the previous and current caregivers to write information down for the child or young person as well as the case worker.

Share information with others

New caregivers, teachers, respite workers and others need to be given relevant information about the child or young person's story, who they are and what has shaped their experiences. It might be helpful to think about what the child or young person struggles with, their strengths and preferences, what sorts of things effectively comfort them and ways to build a relationship with them. For placement changes, basic information about their daily routines is also important and allows for some continuity and familiarity. For example, what are their sleep/wake routines? What do they like to eat? How do they spend their evenings? What bath or hygiene products do they like? The more information that can be gathered, the better.

Transition plans can look different depending on the type of transition and the time available to facilitate it. In all cases it is important to maintain regular communication with the care team and advocate for the child or young person's needs. It is critically important to share information with the care team about how the child or young person is managing during the placement transition.

Help the child or young person learn how to manage their emotions

Because of the significant impact a transition can have on a child or young person, it is expected that their behaviour and emotion management will deteriorate during this time. It is important to maintain existing expectations and rules so the child or young person has a sense of continuity and predictability. It is also important to increase proximity and emotional safety by being more available and responsive than usual and showing them compassion and understanding. Assisting the child or young person to understand that their behaviours are linked to stress and overwhelm and make sense given what is happening in their life.

Helping the child or young person build up their connection with their body and learn effective distress tolerance skills will support them in managing difficult situations. Activities such as deep breathing, mindfulness, listening to music, dancing, walking, stretching, having a warm bath or writing down their thoughts can all be helpful for children and young people who are struggling with big emotions such as those associated with transitions.

Prepare the child or young person for their transition out of care

Transitions out of care can occur when a child or young person is reunified with parents or when a young person turns 18 years of age. Young people are better able to manage their transition out of care if they are practically and emotionally prepared for this change.. Many of the strategies described above may be of assistance in relation to reunification transitions.

For young people transitioning out of care at 18 years, the preparation should ideally start at around 15 or 16 years of age (or whenever they are developmentally ready). Preparation might include independent living skills training (time management, cooking, managing finances), emotional preparation for living alone, managing friendships and relationships, and developing plans for managing contact with family members (especially those who may have been involved in past harm of the child or young person). It is important to recognise that family contact is likely to occur when the young person in care turns 18 years of age and that they will need to develop skills to manage this situation well. The child or young person's case worker should work in partnership with caregivers to help plan for this transition. Case workers should refer to the [Transition to Adulthood chapter](#) of the Manual of Practice for latest guidance to support young people to transition from care. Caregivers can also refer to [CREATE foundation website](#) for further information.

Additional considerations when providing care for Aboriginal and Torres Strait Islander children and young people.

In addition to the strategies mentioned above, the experiences of Aboriginal and Torres Strait Islander children and young people need to be understood within the context of historical, political and systematic disadvantages and the ongoing overrepresentation of Aboriginal and Torres Strait Islander children and young people in the child protection system. When caring for Aboriginal and Torres Strait Islander children and young people, caregivers should ensure that they have received appropriate training and support from their caregiver support agency or the relevant departmental staff. Therefore, caregivers should develop an understanding of the child or young person's cultural background to strive to create a culturally safe and inclusive environment to strengthen their relationship with the child or young person and to continue to offer support during any transitions.

When caring for and thinking about the social and emotional wellbeing of Aboriginal and Torres Strait Islander children and young people, additional factors that may contribute to their needs and behaviour need to be considered. These include cultural and intergenerational trauma caused by harmful practices associated with colonisation such as forced dispossession of land and Country, forced suppression of culture, the Stolen Generations, assimilation policies, and systemic racism and oppression. Aboriginal and Torres Strait Islander children and families may also hold broader notions of wellbeing that include spirituality, community, and interconnectedness with land that must be recognised and supported.

Transitions can represent significant disruption for Aboriginal and Torres Strait Islander children and young people in care, particularly if the transitions involve placement in a non-Aboriginal and Torres Strait Islander family. When an Aboriginal and Torres Strait Islander child or young person perceives that they have little power over what their care arrangements are, it can be difficult for them to maintain their own connection to culture without support. It is essential that the impact of transitions on cultural continuity which may involve disconnection from land or community is addressed as part of transition planning for Aboriginal and Torres Strait Islander children and young people.

Placement changes often exacerbate the feelings of loss, confusion, and identity conflict that Aboriginal and Torres Strait Islander young people feel about being removed from the care of their parents. They may also experience cultural shock or trauma when in environments that don't align with cultural values. It is important to build and maintain their sense of identity and emphasise recognition and affirmation of their Aboriginal and Torres Strait Islander culture. Caregivers and support teams must ensure that connection to culture for Aboriginal and Torres Strait Islander children and young people undergoing placement changes is not just recognised but actively invigorated while respectfully assisting the child to understand what is happening.

Additional considerations when providing care for children and young people from culturally and linguistically diverse backgrounds

Children and young people from culturally and linguistically diverse (CALD) background also have additional challenges when it comes to transitions as they have may struggled with past transitions such as moving to a new country. Therefore, it is important for caregivers to receive additional information, training and support from their caregiver support agency or relevant departmental staff when caring for children and young people from culturally and linguistically diverse backgrounds.

Caregivers can connect with local CALD organisations to continue to enhance their understanding of the child or young person's cultural background and the impact of it on their worldview.

Iceberg model in action

Zoe in family based care

3-year old Zoe has a difficult time leaving her family based foster care placement to attend childcare. She often resists her morning routine, refusing to dress, brush her teeth, or get ready. She usually refuses to get out of the car requiring her caregiver to carry her inside and is often tearful and distressed on separation.

Her caregiver listens to the messages underneath the behaviour – *“It’s scary leaving you and my home to go to a different place. I need to make myself bigger and more powerful to stay in control. I’m worried that I won’t come back to you afterwards. I need you to hear how I’m feeling and this is the only way I know how to tell you.”*

Zoe’s caregiver responds by offering compassionate understanding and emotional support to her when she gets upset. They also create a “going to childcare” flip book for her with photographs of every step that needs to be completed throughout these transitions. Zoe’s caregiver watches some children’s videos which talk about going to childcare and normalise this being a tricky transition but also speak positively about the fun children have at child care. The caregiver consistently reassures Zoe that she will return home afterwards and her child care workers do the same. Zoe’s caregiver also share information about Zoe’s usual routines and preferences with the child care workers to help them make child care more familiar and comfortable for Zoe.

Jayden in residential care

11-year-old Jayden has been expelled and has to change schools. He is frustrated and angry about having to go to a new school and has lashed out at his residential care workers about the change.

Jayden’s residential care workers listen to the messages underneath his behaviour – *“I’m really scared and I don’t know what to do. it’s my fault this is happening – if I’d been able to be good, they wouldn’t have sent me away. I bet they won’t like me at this new school either. I’m doomed.”*

Jayden’s residential care workers respond by giving him a clear narrative about the change which minimises blame. They say *“Jayden, I know you will be starting a new school soon and that is a big change. Lots of people find changes difficult and it’s okay if you feel pretty freaked out about this. I want you to know that I don’t blame you for what’s happened. This new place is willing to take a chance on you and I hope you’ll give them a chance too.”* Jayden’s residential care workers help him identify all the things that won’t change *“I’ll still drive you to school and pick you up in the afternoon and you can still take your Among Us backpack. I will pack your favourite cheese sandwich for lunch”*. His residential care workers talk with the school to put together an ‘intro pack’ for Jayden which shows him all the important areas of the school and organise to visit the school so that he knows where he is going on his first day. His residential care workers also share information about Jayden’s needs, preferences and strengths to help his new teaching team support him.

Tyler in family based care

5-year-old Tyler has spent eight months in a short-term foster care placement. Since entering the short-term placement, Tyler's behaviours have settled and he has made developmental gains. A long-term foster placement has been identified and he will soon make this transition. Since he was told about the transition, Tyler's behaviour has regressed back to the way that he was on initial entry into care. He is easily distressed, angry most of the time and acts out aggressively. Tyler has also started insisting that his caregivers feed him "like a baby" at mealtimes and is having trouble with toileting.

Tyler's short-term caregivers listen to the messages underneath his behaviour – *"I have so many big feelings about this change, I don't know how to cope. I'm scared and sad and feel like this is all my fault for being a 'bad kid.'"*

Tyler's short-term caregivers respond by working together with the care team, including the future long-term caregivers, to design a transition plan which will best support Tyler. They also agree on a narrative that will help Tyler understand what is happening and makes it clear that this change is not happening because of anything that he has done. Tyler's short-term caregivers stay compassionate and available to him, increasing proximity and connection. They go along with his requests to be fed at mealtimes and turn this into a game (playing 'baby') which Tyler can ask for whenever he feels the need for special care. Tyler's short-term caregivers gather as much information as they can about Tyler's existing routines focusing on special items and activities which help Tyler feel safe, connected, and supported. Tyler's short-term caregivers fill out several pages of his life story book with recollections of enjoyable or funny things they have done together. They take photos of Tyler's favourite places and people and include this information in his life story book. As there is a significant geographical distance between the current short-term placement and the future long-term placement, it has been determined that Tyler's short-term caregivers will not maintain physical contact with him when he transitions to the new placement. A plan for videoconferencing contact with the short-term caregivers has been developed for Tyler when he enters the new long-term placement, and this has been incorporated into the transition plan and his case plan. Tyler's caregivers access additional support from their own support network (their foster care support worker and personal friends) as this time is challenging for them too and they have their own feelings of grief and loss about the placement ending.

If you have any further questions, please do not hesitate to contact your case worker for further support.