9TH NATIONAL CONFERENCE HELPING CHILDREN - VICTIMS OF CRIME WARSAW, 22ND-23RD OCTOBER 2012

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Table of Contents:

Organizational information	5
Conference program	6
Speakers	9
Abstracts	12
Notes	21

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Organizational Information

The organizers will provide conference materials, coffee breaks and lunches. Coffee and lunches will be served in the Main Hall and in Gałczyńskiego Hall on the 4th floor.

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The sessions in Koncertowa and Rudniewa Halls will be held both in English and Polish and the interpretation will be provided by the organizers. The headsets will be available in the halls.

The stamp and signature on the business trip form may be obtained at the information desk in the Main Hall on the 6th floor.

Certificates of attendance are provided in the conference materials, on the last page. The certificate does not require neither stamp nor signature.

Evaluation forms can be found in the conference bags and at the information/registration desk in the Main Hall on the 6th floor. Participants are kindly asked to complete them and put them into special boxes at the information/registration desk.

The movie: "We need to talk about Kevin" will be screened at Koncertowa Hall.

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Conference program: 22 October, 2012

8.00-9.30 Registration

9.30-11.00 Opening Session

Welcome adresses: Wojciech Węgrzyn, Undersecretary of State in the Ministry of Justice, Włodzimierz Paszyński, Vice-President of Warsaw, Monika Sajkowska, PhD, Director of Nobody's Children Foundation

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Opening Lecture:

"The beauty is what goes beyond our strength". About Janusz Korczak – *Maciej Sadowski* Janusz Korczak's ideas in contemporary professionals' work – *Jolanta Zmarzlik* Korczak Project: Nobody's children in today's world

11.00-11.30 Coffee Break

11.30-13.00 Plenary Session

Protecting children from abuse

Narrative interviewing – Prof. Thomas D. Lyon, USA Awarding Child Friendly Interview Room certificates – Undersecretary of State in the Ministry of Justice Wojciech Węgrzyn Trauma sensitive communication with parents – Prof. Peter Adriaenssens, Belgium Incredibly caring or trust betrayed? The challenges of identifying and working to safeguarding children in whom illness is fabricated or induced – Prof. Jan Horwath, dr Richard Wilson, UK

Moderated by: Maria Keller-Hamela

13.00-14.00 Lunch

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14.00-15.30	Parallel sessions					
	Hall: Koncertowa	Hall: Rudniewa	Hall: Renesansowa	Hall: A	Hall: B	
	How to build rapport with children: Narra- tive practice – <i>Prof.</i> <i>Thomas Lyon, USA</i> Moderated by: <i>Beata</i> <i>Wojtkowska</i>	Clinical application of trauma sensitive communication with parents – <i>Prof. Peter</i> <i>Adriaenssens, Belgium</i> Moderated by: <i>Monika</i> <i>Sajkowska, PhD</i>	Good parenting Parenting without vio- lence: Comprehensive programs for supporting young children' parents – <i>Renata Szredzińska</i> Being a Dad: Working with fathers in the field of child abuse prevention – <i>Dariusz</i> <i>Bronowski</i> , <i>Adam</i> <i>Stepnowski</i> - <i>Said</i> "Words hurt for life": Prevention of verbal abuse against children – <i>Marta Skierkowska</i> Moderated by: <i>Karolina</i> <i>Mazurczak</i>	Difficult diagnosis – abuse of small children aged 0-6 – Katarzyna Fenik, Renata Katucka	Academy of Protection against Violence. How to educate youth about violence? – Dorota Gajewska, Lucyna Kicińska	

15.30-16.00 Coffee Break

16.00-17.30	Parallel sessions					
	Hall: Koncertowa	Hall: Rudniewa	Hall: Renesansowa	Hall: A	Hall: B	
	Resilience in children following the exposure to violence Resilience theory: Questions and answers - Anna Borucka Resilience: a word that does not exist in Polish but describes the phenomenon which does exist in a way we do not understand - dr Krzysztof Szwajca Resilience – a process or a personal charac- teristic? Cases from research – dr Krzysztof Ostaszewski Moderated by: Dorota Gajewska	Incredibly caring or trust betrayed? The challenges of iden- tifying and working to safeguarding chil- dren in whom illness is fabricated or induced – dr Christopher Bools, Jenny Gray, Prof. Jan Horwath, Dr Richard Wilson, Wielka Brytania Moderated by: Renata Szredzińska	Interviewing children in civil proceedings: Panel discussion – Emilia Naumann, Olga Trocha, Ewa Trybulska-Skoczelas	Interviewing young witnesses: Difficulties related to informing children on their rights and duties – Daria Drab, Maria Keller-Hamela	The role and operation of multidisciplinary teams working with vulnerable families and children at risk: British experience – Joanna Gorczowska	

17.45-19.30 The movie "We need to talk about Kevin", directed by Lynne Ramsay

9th National Conference "Helping Children - Victims of Crime"

Conference program: 23 October, 2012

9.00-10.45 Plenary session

Prevention of child abuse: Systemic solutions

Every Child Matters: Child protection system in UK - Joanna Gorczowska

"We protect children": The policy on protecting children from violence in care, educational centres and other institutions – Monika Sajkowska, PhD

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Interviewing child witnesses. Evolution of legal regulations and functioning of the justice system - Olga Trocha

Moderated by: Prof. Maria Kolankiewicz

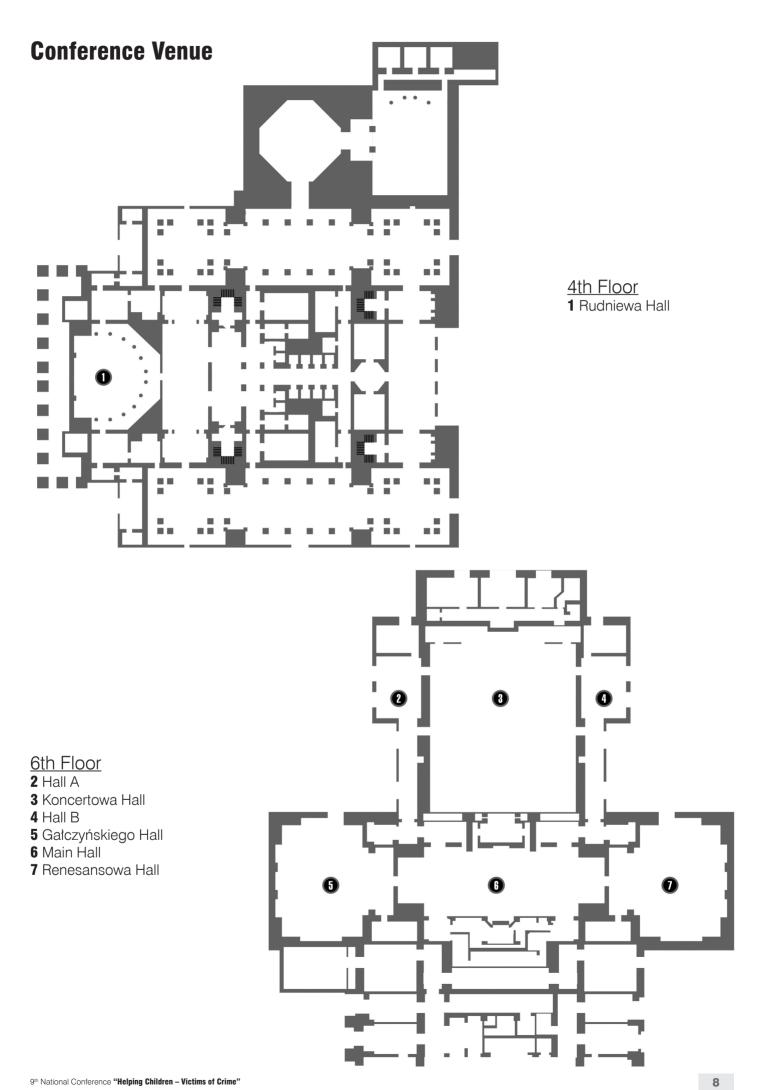
10.45-11.15 Cofee break

11.15-13.00	Parallel sessions					
		No more YES–NO. Asking open-ended qu- estions – <i>Prof. Thomas</i> <i>Lyon, USA</i> Moderated by: <i>Maria</i>	Trauma –focused treatment methods for children – Sofia Bidö, Pontus Nilsson, Sweden Moderated by: Renata	After the amendment to the Domestic Violence Prevention Act: The "Blue Card" procedure – panel discussion – <i>Rena-</i> <i>ta Durda, Danuta</i>	Session for grantees of the Safe Childhood programme – Daria Drab, Gabriela Kühn	Standards for develo- ping forensic experts opinions in cases of child sexual abuse – Alicja Budzyńska, Teresa Jaśkiewicz-Oby- dzińska
	Keller-Hamela	Katucka	Kuciewicz, Grażyna Pisarczyk, Justyna Podlewska, Grzegorz Wrona		ULIIISKA	

13.00-14.00 Lunch

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14.00-15.45	Parallel sessions					
	Hall: Koncertowa	Hall: Rudniewa	Hall: Renesansowa	Hall: A	Hall: B	
	Therapy for sexually abused children	In order to prevent child's death	Youth's and Children's addiction to Internet	Educating parents of children during early school years	The model procedure for forensic psycholo- gists in cases of child	
	Trauma Focused Cognitive Behavioural Group Psychotherapy for Children – Sofia Bidö, Pontus Nilsson,	Child's death as a con- sequence of violence or/and neglect – Joan- na Włodarczyk	The problem of exces- sive use of Internet by children – Szymon Wójcik	– Daria Drab, Karolina Mazurczak	sexual abuse – Teresa Jaśkiewicz-Obydzińs- ka, Ewa Wach	
	Sweden Cognitive Behavioural Therapy for abused children with behavio-	Reviewing child deaths in UK – Jenny Gray, Dr Richard Wilson	Therapy for children and youth addicted to Internet – <i>Maria</i> <i>Jarco</i>			
	ural problems – Konrad Ambroziak, PhD Cognitive Behavioural	The process of change in the child protection system: The case of Baby P. – Joanna	Prevention of excessive use of Internet – Łukasz Wojtasik			
	Therapy for child- ren and adolescents experiencing anxiety disorders – Anna Ćwiklińska-Zaborowicz	Gorczowska Moderated by: Gabrie- Ia Kühn	Moderated by: Katarzy- na Zygmunt-Hernan- dez			
	Moderated by: Urszula Makowelska					



9th National Conference "Helping Children – Victims of Crime"

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Speakers



Peter Adriaenssens

is Professor Child & Adolescent Psychiatry at Catholic University of Leuven KU Leuven, Belgium. Head of the clinical crisis unit Child Psychiatry. Trainer Family & System therapy. Director of the Confidential Center for Child Abuse & Neglect. President of the Princess Mathilde Foundation. President of St Jeanne Devos Foundation on children's rights in India, where five rescue shelter homes for child domestic workers, victims of abuse, trafficking and exploitation were opened. Author of many publications on Child abuse & neglect, social child psychiatry, family therapy including Adriaenssens, P. (2009). From protected object to lawful subject. Practical applications of the Belgian model of child protection.

Journal of Child Health Care, 2 (3), 293-304. De Haene, L., Rober, P., Adriaenssens P., Verschueren, K. (2012). Voices of dialogue and directivity in family therapy with refugees: Evolving ideas about dialogical refugee care. Family Process, in press.

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Konrad Ambroziak

has a PhD in philosophy. He is a certified cognitive behavioural therapist and a member of the Polish Society for Cognitive Behavioural Therapy and the Polish Society for Motivational Therapy. He gained experience in working with children and young people within the Extraordinary Children Association (Stowarzyszenie Niezwykłe Dzieci), where he worked as a co-therapist with children and young people with ADHD and the Asperger syndrome, and ran social therapy groups. He also worked at the Joint Support Centre in Piastow and the Family Centre in Brwinow. Since 2009 he has worked at the Nobody's Children Foundation as a therapist at the "Mazowiecka" Child Advocacy Centre.



Sofia Bidö

is a Clinical Psychologist and Reg. Psychotherapist at the Grinden Clinic in Stockholm. The Grinden Clinic is a specialized clinic for children and adolescents aged 0-17 years traumatized by domestic violence and sexual abuse in close relationships. The Clinic also specializes in children and adolescents with sexual behavioural problems. The Grinden Clinic provides Trauma Focused Psychotherapy and Psychotherapy for sexual behavioural problems, mainly in group. The Clinic also offers education and consultation and is developing methods for treating abused children. Sofia Bidö has previously worked at a local Child- and Adolescent Psychiatric Outpatient Clinic in Stockholm, providing general psychiatric treatment.



Christopher Bools

is a consultant psychiatrist in a community child and adolescent mental health service. Particular interests are psychosomatic disorders, the Autism Spectrum and psychiatric disorders associated with severe school non- attendance. He carried out research into what was then known as "Munchausen Syndrome by proxy" and is now referred to as "Fabricated or Induced Illness in a child by a carer". This led to involvement in the UK Guidelines and the training materials. He wrote the Reader which accompanies the videos and other training materials.



Anna Borucka

is a psychologist and junior researcher at the Public Health Unit of the Institute of Psychiatry and Neurology in Warsaw. Her research interests include: prevention of risky behaviours among children and adolescents, evaluation of school-based prevention programmes, school-based interventions, and young people's mental health. She is the author or co-author of more than 80 scientific and popular scientific publications on topics including the prevalence of risky behaviours among young people, protective factors and risk factors related to risky behaviours, and the development and evaluation of schoolbased prevention programmes.



Anna Ćwiklińska-Zaborowicz

is a psychologist, certified cognitive behavioural therapist and couple therapist. She works at one of Warsaw's psychological and pedagogical counselling centres and the Professional Help Centre. She is a postgraduate (PhD) student at the Psychology Faculty of the Warsaw School of Social Psychology. In her professional work she deals with children and young people (doing assessment and treatment) and she provides therapy for adults and couples. She collaborates with a childbirth education centre. She is a co-author of the Polish adaptation of the Coping Cat programme.

Publications: Ćwiklinska-Zaborowicz, A. (2010): Charakterystyka oraz terapia poznawczo-behawioralna zaburzeń lękowych dzieci i młodzieży. Wiadomości Psychiatryczne, 13 (4): 200-204; Ćwiklińska-Zaborowicz, A. (2012): Terapia poznawczo-behawioralna pacjentki z depresją poporodową – opis przypadku. Wiadomości Psychiatryczne, 15(1): 26-36.

9th National Conference "Helping Children - Victims of Crime"

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Joanna Gorczowska

has an MA in social education from the Łódź University and a diploma in systemic practice from the Tavistock Clinic in London. She is a member of the Health and Care Professionals Council and the British Association for Coaching as a coach and organisation development consultant. She has worked in London for 9 years as a social worker and systemic practitioner. During her professional practice she worked as an assessor of professional and kinship foster families. She provided training for foster parents ("Skills to Foster") and developed intervention and therapy porogrammes for foster families

taking care of high need children. She spent 2 years working for Action for Children, where she made systemic assessments (for British family courts) of biological families whose children had been placed in the care system. She also provided therapeutic interventions and support programmes for children and their biological families in the reunification process. For the past 3 years she has assessed Polish candidates for kinship foster parents for children placed in the British care system (the assessments are ordered by the family court). Her professional interests include systemic solutions in the context of support and working with families and children atrisk. She is also interested in organisational culture and in how the mechanisms of an organisation's functioning influence its relationships with clients.



Jenny Gray

OBE trained as a social worker in New Zealand and has worked in child welfare settings there and in the UK. She joined the British Government in 1991 and has held a number of roles, including working on the development of methodologies to inspect children's services and developing policies and related materials to support their national implementation. Her current responsibility is to provide professional advice within the Safeguarding Children Policy Group. She has lead responsibility for a number of policy areas including fabricated or induced illness (FII). She was responsible

for the development of the government's guidance and the associated training materials on FII. Jenny is President Elect for the International Society for the Prevention of Child Abuse and Neglect.



Jan Horwath

is Professor of Child Welfare at the University of Sheffield, England. Her professional interests include:child protection practice, the development of child welfare policy and practice. Jan works internationally with governments and agencies to develop policy, training and practice. Her publications include Trust Betrayed. Munchausen syndrome by proxy; Child Neglect: Identification and Assessment (2007); The Child's World the Comprehensive Guide to Assessing Children in Need (2010). A book on planning and interventions in cases of neglect is due out in 2012.



Thomas D. Lyon

J.D., Ph.D., is the Judge Edward J. and Ruey L. Guirado Chair in Law and Psychology at the University of Southern California, U.S.A. He is the Past-President of the American Psychological Association's Section on Child Maltreatment (Division 37) and a former member of the Board of Directors of the American Professional Society on the Abuse of Children. His work has been supported by the U.S. National Institutes of Health, the U.S. National Science Foundation, and the U.S. Department of Justice.



Pontus Nilsson

is a Clinical Psychologist at the Grinden Clinic in Stockholm. The Grinden Clinic is a specialized clinic for children and adolescents aged 0-17 years traumatized by domestic violence and sexual abuse in close relationships. The Clinic also specializes in children and adolescents with sexual behavioural problems. The Grinden Clinic provides Trauma Focused Psychotherapy and Psychotherapy for sexual behavioural problems, mainly in group. The Clinic also offers education and consultation and is developing methods for treating abused children. Pontus Nilsson has previously worked at the Child and Adolescent Psychiatric Inpatient Clinic in Stockholm.



Krzysztof Ostaszewski

is a pedagogue with a PhD in humanities. He is an assistant professor and head of the Youth Prevention "Pro-M" Lab at the Institute of Psychiatry and Neurology in Warsaw. He works in prevention of problem behaviours among children and young people. He is the scientific editor of the "Remedium" monthly and a co-author of two prevention programmes "Home Detectives" and "Fantastic Possibilities". He is an expert of the Polish Agency for Solving Alcohol Problems and a grantee of the Fogarty International Substance Abuse Research Training Program at the University of Michigan.



Maciej Sadowski

is the founder of STUDIOMONO (1990), a graphic design studio specialised in book design. His works include more than 2500 book covers, numerous book series and collections, as well as typographic and photographic works. He has designed many logos. He has collaborated with publishers including Czytelnik, Hachette Polska, Instytut Badań Literackich, Iskry, PIW, Prószyński i S-ka, Muza, W.A.B., Wydawnictwo Dolnośląskie, Wydawnictwo Naukowe PWN, Twój Styl, Znak. and many others. He has been nominated twice for the Ikar Award (1996 and 2012).

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Monika Sajkowska

Doctor of Sociology, managing director of Nobody's Children Foundation. Between 1991 and 2008 was an assistant profesor at the Warsaw University's Institute of Applied Social Sciences. Author and co-author of research into the prevalence of child abuse in Poland, social attitudes towards the problem, and the picture of the child abuse problem conveyed by the media. Author of scientific and popular-scientific publications on child abuse. Editor in chief of the quarterly Abused Child: Theory, Research and Practice, published by the Nobody's Children Foundation.



Krzysztof Szwajca

MD, PhD, is a psychiatrist and psychotherapist, a staff member of the Child and Adolescent Psychiatry Clinic, Collegium Medicum, Jagiellonian University in Krakow, where he provides in-home family therapy as a member of the In-Home Treatment Team (headed by Ryszard Izdebski). He also manages the Krakow Institute of Psychotherapy and supervises several centres working with children, young people and families. A former student and follower of Prof. Maria Orwid (a member of her team researching the long-term effects of the Holocaust trauma), he is a university teacher and the author of more than 100 scientific publications and conference lectures/presentations.



Richard Wilson

is a paediatrician from a large UK hospital. He has been a Designated Doctor for Child Protection, and Chair of the Working Party of the Royal College of Paediatrics and Child Health on Fabricated or Induced Illness by Carers 2002. He has worked in prevention of infant and child deaths, and be-reavement care of children and families.



Joanna Włodarczyk

is a sociologist, a PhD student at the Institute of Applied Social Sciences, Warsaw University. Since 2009 she has been working in the Nobody's Children Foundation. Since 2011 she has been the coordinator of the research department FDN. Member of the Polish Sociological Association.



Jolanta Zmarzlik

is a graduate of the Institute of Social Prevention and Rehabilitation at the Warsaw University and the Clinical Director of the Nobody's Children Foundation. She makes assessments and provides therapy for children, young people, and adults, prepares forensic psychological opinions, and conducts training on child abuse. She is a certified PARPA (National Agency for Solving Alcohol Problems) specialist in preventing domestic violence and a lecturer at the Warsaw School of Social Psychology.

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Abstracts

What did Janusz Korczak look like when he was a little boy? When and where did he make the decision not to have his own family? What did the covers of the first editions of his books look like? How many portraits of the great educator have survived? Why is his call for children's rights still relevant today?

Dozens of questions and lots of answers - and all this in a picture album titled Janusz Korczak. Fotobiografia (Janusz Korczak: Photobiography), published in the Korczak Year by Iskry.

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The book presents the story of a great Polish educator, writer, physician, and a world-famous advocate of children's rights. Told with photographs and quotations from Korczak's works, the story may make an impression of an autobiography. Devoid of subjective comments, the photobiography leaves space for free interpretation and invites the reader to Korczak's intimate world. This is the first complete collection of iconographies (pictures, letters, and documents) illustrating the life and work of the author of King Matt the First.

Sources of photographs:

Historical Museum of Warsaw: KORCZAKIANUM Centre for Documentation and Research; Emanuel Ringelblum Jewish Historical Centre; Ghetto Fighters` House Museum in Israel; Museum of Independence in Warsaw; National Library in Warsaw; Public Library of Warsaw; Artistic Archive of the Ateneum Theatre in Warsaw.

Partners: Historical Museum of Warsaw; Adam Mickiewicz Institute; Nobody's Children Foundation; Embassy of Israel in Warsaw.

Janusz Korczak's ideas in contemporary professionals' work – Jolanta Zmarzlik, Nobody's Children Foundation

Observing, drawing conclusions, associating facts, predicting, pondering, and marvelling - these were the tools used by the Old Doctor. The tools were simple and his conclusions are still valid and universal today. Janusz Korczak managed to enter children's world gracefully, exploring their fears, weaknesses, needs and desires.

He asked us, adults, to love children wisely and respectfully and to forgive them for their mistakes, and at the same time he emphasized that "the limits of my rights and of the child's must be fixed". After so many years since the publication of Korczak's book How to love a child, can we still do it?

Nipper, tot, brat, imp - even when adults are not angry, even when they want to be good.

Well, we got used to it, but sometimes we feel hurt and angered by such disrespectful treatment.

Labelling, hurting with words, irony, and disrespect - these "child-rearing" tools are skilfully used by today's parents, too. Don't we still know how to do it differently?

"Janusz Korczak: Nobody's Children in today's world"

Is a social campaign carried out in 6 Polish cities (Warsaw, Poznań, Toruń, Gdynia, Wrocław, and Kraków). Special multimedia installations were displayed at the railway stations, featuring children portrayed in a way resembling their peers in the time of Janusz Korczak. The project was carried out under the patronage of the former First Lady Jolanta Kwaśniewska within the 'Janusz Korczak Year''.

Plenary Session. 11.30-13.00. Hall: Koncertowa

Opening Session. 9:30-11:00. Hall: Koncertowa

"The beauty is what goes beyond our strength". About Janusz Korczak – Maciej Sadowski

Protecting children from abuse

Narrative interwieving – Prof. Thomas Lyon, USA

Interviewing child witnesses and obtaining credible evidence from them is a very difficult task and as such it requires special attention. The value of the collected evidence depends on a variety of factors, such as the witness' developmental abilities, individual characteristics of the child and his/her family, and, primarily, the way of conducting the interview. When interviewing a child, one should not only carefully plan the time and place of the interview, but also make sure that it is conducted in accordance with a specific procedure, which makes it easier to obtain valuable evidence.

The presentation will overview a structured NICHG protocol for interviewing witnesses and the benefits of using the tool. The protocol was originally developed for interviewing child witnesses in sexual abuse cases.

Trauma Sensitive Communication with Parents – Prof. Peter Adriaenssens, Belgium

In trauma care, we often have to deal with a non-cooperative communication style of parents. We illustrate how this can be part of complex trauma in their youth. Understanding the underlying mechanisms of this attitude is essential to provide better care for their children. This is why we adopted trauma sensitive communication skills.

Monday, 22 October



PATRONAT HONOROWY JOLANTA KWAŚNIEWSKA REALIZACJA JAJKOFILM&JAGA HUPAŁO BORN TO CREATE Reżyserta, Karolina, pender Noińska

PARTNER STRATEGICZNY GRUPA PKP

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Inncredibly caring or trust betrayed? The challenges of identifying and working to safeguarding children in whom illness is fabricated or induced – *dr Christopher Bools, Jenny Gray, Prof. Jan Horwath, dr Richard Wilson, UK*

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This presentation will explore some of the issues and challenges that practitioners encounter when faced with the possibility that a parent is fabricating or inducing illness in their child (FII). Carers may exhibit a range of behaviours when they wish to convince others their child is ill. A key professional task, therefore, is to distinguish between a very anxious carer who may be responding in a reasonable way to a very sick child and those who exhibit abnormal behaviour that may constitute ill treatment of the child, such as: inducing symptoms in children by administering medication, interfering with treatments; exaggerating symptoms or obtaining specialist treatments for children who do not require them. As the way in which the case is managed will have a major impact on the outcomes for the child particular attention will be given in the presentation to identifying emerging concerns; keeping an open mind when working to identify FII and collaborative working between professionals and where appropriate family members to identify and assess possible FII.

Expert Session, 14:00-15:00, Hall: Koncertowa

How to build rapport with children: Narrative practice - Prof. Thomas Lyon, USA

Participating in an interview is a difficult task for a child, one that requires not only focusing attention and adapting to a new situation, but also telling the interviewers about the child's traumatic experiences. Every child has unique personal characteristics and cognitive abilities and therefore experiences the interview situation differently and testifies in his/her own unique way. Some children find it difficult to start a free narrative about the traumatic events. The interviewer's task is to encourage the child to talk by starting the interview with questions about neutral topics not related to the investigated abuse. The attendees will have an opportunity to learn about open-ended questions that facilitate rapport-building and encourage the child to provide a free narrative account of the investigated events.

Expert's Lecture, 14:00-15:00, Hall: Rudniewa

Clinical aplication of Trauma Sensitive Communication with Parents - Prof. Peter Andriaenssens, Belgium

We are conscious about the incidence of trauma related pathology in children, and we know that the prevalence of traumatic stress in the lives of their parents is extraordinarily high. Nevertheless, we remain surprised when parents are not cooperative, avoid our supportive care or are threatening professionals. Communication with them has to keep in mind how they adapted to difficult life-events. Often these parents have experienced on-going trauma throughout their lives in the form of childhood abuse and neglect, exposure to domestic violence, to transgenerational community violence, relational problems, poverty, lack of safety and sense of security. These experiences have a significant impact on how these parents think, feel, behave, relate to others, and cope with future experiences. They have learned to adapt to these traumatic circumstances in order to survive, but their ways of coping interact negatively with communication with caregivers and other professionals. It is clear that understanding the underlying mechanisms of their non-cooperative communication skills. In order to respond empathically to the needs of these parents/trauma survivors, to ensure their physical and emotional safety, to develop realistic treatment goals, and at the very least to guarantee at the same time a proper and protective approach to their child, all practices must be provided through the lens of trauma knowledge

Paper Session, 16:00-17:30, Hall: Koncertowa

Resilience theory: Questions and answers - Anna Borucka, Institute of Psychiatry and Neurology in Warsaw

Some children face difficult problems, such as: parental mental illness, divorce, poverty, or domestic violence. In the scientific jargon they are referred to as high-risk children. Some of them manage to overcome the ill fate and do well in spite of the difficulties. Many of them, however, do not succeed. Such children join the ranks of people who are excluded from the social mainstream. Therefore, it would be interesting to know the factors determining the life outcomes of children who grow up in difficult circumstances.

The theory of resilience explains why some children and young people thrive or do well in adverse circumstances, such as chronic stress or traumatic events. The term "resilience" comes from physics, where it refers to materials that are highly flexible and able to spring back into shape after being deformed. In the social science the term is used as a metaphor describing the processes of counterbalancing and reducing the effects of negative events (risk factors). The main interests of resilience researchers include the protective factors and mechanisms that facilitate positive adaptation among children and young people. The fundamental goal of all the resilience research has been to effectively help children and young people to overcome adversity. This presentation will discuss the key concepts related to the theory of resilience and review the research conducted in the field.

Resilience – a word which does not exist in Polish, but describes a phenomenon which does exist in a way we do not understand – Krzysztof Szwajca, MD, PhG, Child and Adolescent Psychiatry Clinic, Collegium Medicum, Jagiellonian University

The concept of resilience tries to explain the phenomenon of positive adaptation/coping despite experiences of adversity or trauma. Most victims are able to cope with the effects of trauma – on their own or with some help from their social networks.

9th National Conference "Helping Children – Victims of Crime"

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The term is translated into Polish in different ways: as "sprężystość" (ability to spring back), "odporność" (resistance"), or "elastyczność" (flexibility). The first of these terms seems to prevail in the psychological discourse about trauma, but its "victory" is so narrow that it is hardly noticeable. When we enter the word "sprężystość" (ability to spring back) in a popular web browser, we will quickly move from psychology to pages suggesting how to chose a good mattress or make your breasts more supple.

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Can a nonexistent word be of any use? Does the confusion about the English term reflect nothing more but the fact that it is not well-established in the Polish language? Can it suggest we are so much focused on the destructive effects of trauma that we can hardly notice the other side of the coin? If this is true, how can it affect our therapeutic practice?

I have been invited, as a practitioner, to take part in a discussion that has been so far dominated by theoretical psychologists in Poland. This is a risky invitation. Antonovsky once said that "psychiatrists and all those who study or assess mental health tend to search for deviation, psychopathology, and weakness, because this is how they were educated and what they have invested in, so this is where their interest lies". Additionally, we, clinicians, are quite unlikely to meet individuals who have coped successfully.

The concept of resilience is not easily operationalised. It causes some definitional problems and it is difficult to measure its key variables. The topic lies in the borderlands between several disciplines: genetics, neurophysiology, cultural anthropology, health science, developmental psychology, and psychiatry. Not surprisingly, it is often oversimplified. There are controversies about its usefulness in the clinical practice: in predicting post-traumatic disorders and developing interventions. I am convinced, however, that without the awareness that trauma may lead to... increased psychological resistance (or resilience) I would be a poorer psychiatrist and psychotherapist. We need to know about resilience.

Resilience: A process or a personal characteristic? Cases from research – Krzysztof Ostaszewski PhD, Institute of Psychiatry and Neurology in Warsaw

The concept of resilience has inspired at least two lines of research. The first one is focused on the processes of interaction between risk factors and protective factors. Its main subject is the models of counterbalancing or neutralising the environmental risk. Findings from these studies suggest that the following factors perform a protective function in adolescence: good relationships with the parents and parental support, monitoring the adolescent's behaviour be the parents, support provided by the school environment, individual social skills, having non-formal adult mentors, and being religious.

The other line of research analyzes individual characteristics that may protect the individual in the face of serious threats, adverse life circumstances or traumatic events. These studies focus on the relatively stable individual features or characteristics that determine the person's psychosocial resilience, such as intelligence, perseverance and determination, sense of humour, optimism, and ability to tolerate negative moods.

In studies concerning young people's risky behaviours, including violence, I opt for adopting the perspective which treats resilience as a multifaceted process of interaction between risk and protection. This approach helps to explore the relationships between individual characteristics and the features of different environments (such as family, school, neighbourhood, local community). In other words, this is a more "ecological" approach to young people's risky behaviours, which provides better possibilities to use the research findings in health promotion and prevention programmes.

In my presentation I will discuss an example of using the findings from research into problem behaviours (substance use, delinquency, violence, playing truant) among middle school students in Warsaw. This research points to good teacherstudent relationships as a significant protective factor. The results of these studies have become the basis for developing and implementing a training programme for middle school teachers in Warsaw, "Teachers Academy". The goal of the "Academy" is to consciously enhance the factors and processes that can counterbalance the growing risk inherent in this stage of life and development. This line of action is realistic and friendly to young people and the school environment.

Expert's Session, 16:00-17:30, Hall: Rudniewa

Developing Knowledge and Skills to Safeguard Children in whom Illness is Fabricated or Induced – dr Christopher Bools, Jenny Gray, Prof. Jan Horwath, dr Richard Wilson, UK

This workshop will provide participants with an opportunity to identify the knowledge and skills required by professionals who may come into contact with or work directly with children and their families where there are concerns about FII.

Consideration will be given to ways in which the required knowledge and skills can be developed through training by drawing on the training materials *Incredibly Caring*, which were developed by the English Department for Education. The presenters will also draw on their experiences of using and adapting these materials to meet the needs of professionals in different nation states. Participants will have an opportunity to sample training activities and explore the challenges associated with training on this topic.

Particular attention will be given to exploring ways in which practitioners can be made aware of the barriers to the recognition of FII, the identification of individual cases and the challenges of multidisciplinary collaboration. Attention will also be paid to meeting the training needs of managers, including the need to develop local policy and contingency planning as well as supervising staff working with these complex cases. There will be an emphasis throughout the workshop on identifying ways in which potential difficulties in maintaining child-centred practice can be addressed.

Screening of the movie, 17.45-19.15, Hall: Koncertowa

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"We need to talk about Kewin", directed by Lynne Ramsay

Directed by Produced by

Screenplay by

Cinematography by

Music by Costume designer Scenography by Lynne Ramsay Jennifer Fox Luc Roeg Bob Salerno Lynne Ramsay Rory Stewart Kinnear Seamus McGarvey Editing by Joe Bini Jonny Greenwood Catherine George Judy Becker





Kevin's mother struggles to love her strange child, despite the increasingly vicious things he says and does as he grows up. But Kevin is just getting started, and his final act will be beyond anything anyone imagined.

We would like to thank Best Film for sharing this movie for free.



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Tuesday, 23 October

Expert's Session, 11.15-13.00, Hall: Koncertowa

No more YES-NO: Asking open-ended questions during child interviews - Prof. Thomas Lyon, USA

Apart from the rapport-building phase and informing the child about his/her rights and obligations, the NICHD structured investigative interview protocol includes the free recall phase and the phase of substantive questions concerning the suspected abuse. The lecture will present techniques of asking open-ended questions helpful in obtaining high-quality evidence. It will discuss research concerning the problems and limitations associated with asking children questions that can be answered "yes" or "no". The "tell me more about it" technique and other techniques facilitating free recall will be presented.

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Expert's Session, 11.15-13.00, Hall: Rudniewa

Trauma- focused treatment methods for children – Sofia Bidö, Pontus Nilsson, Sweden

Children are vulnerable to trauma, especially when it occurs in early age and in relationship to attachment figures. How can we help children exposed to domestic violence, sexual abuse and maltreatment and create conditions for them to heal? Children are dependent of close emotional relationships for their development and wellbeing and the presentation focus on how children are affected by trauma in the framework of attachment theory and modern developmental psychology. The presentation also focus on the need to adjust the treatment to the childs characteristics and the specific circumstanses of the case. Different formats for treament are discussed. A range of treatment interventions are presented and the importance of timing is highlighted.

Paper Session, 14.00-15.45, Hall: Koncertowa

Therapy for sexually abused children

Trauma Focused Cognitive Behavioural Group Psychoterapy for Children – Sofia Bidö, Pontus Nilsson, Sweden

Trauma Focused Cognitive Behavioural therapy (TF-CBT) has strong evidence for treatment of trauma symtoms after sexual abuse, violence and other traumatic experiences. In Scandinavia the method is currently implemented and evaluated mainly as individual treatment.

At BUP Grinden we have a long experience of working with traumatized children in groups. During the last couple of years we have developed a model for using TF-CBT in group treatment for sexually abused children and their parents/caregivers. Working with traumatized patients in groups has shown to have many advantages. It deals in a natural way with the common stigmatization of being abused. Working together with others often facilitate for the patients to gradually approach their trauma narrative and to dare to expose to trauma memories. Furthermore it gives many opportunities to practise social skills within the group.

TF-CBT is a structured treatment and consists of different modules that are adapted and used depending on the patient's needs and symptoms. It is a 12 session model for children age 5 to 12, starting with stabilizing the patient focusing on individual coping strategies and parental functioning. Then follows exposure of traumatic memories where work with the child's trauma narrative is done. The later part of the treatment focus on the future, for example establishing safe and healthy routines. A lot of work is done in facilitating the parents to support their child in dealing with their experiences of abuse and the symptoms emanating from that.

The seminar will include a short presentation of the basic structure of TF-CBT. The structure of the group treatment and its different components will be presented. We will demonstrate examples of how to work with the trauma narrative with the children, how and when to involve the parents in this work and how to increase parental functioning. The seminar is useful for anyone meeting professionally with sexually abused children and their families.

Cognitive Behavioural Therapy for abused children with behavioural problems – Konrad Ambroziak, PhD, Nobody's Children Foundation

One of the effects of child maltreatment is behaviour disorders. During my presentation I will discuss behavioural and cognitive models explaining the development of behaviour disorders, with a special emphasis on the effects of physical, emotional, and sexual abuse. When working with abused children who show behaviour problems, one should remember about a couple of important things. First, such children are often not motivated to take part in therapy, so working on their motivation and building a therapeutic relationship seem to be a matter of the utmost importance. Second, accurate models of behaviour disorders will help us develop effective forms of help. These include training in emotion recognition and expression, social skills training, working to improve self-esteem, and working to modify our clients' key beliefs (cognitive schema). When working with children and young people we should often refer to their caregivers' support. In such a case the caregiver's participation in a parenting skills group becomes a part of the therapeutic process.

Cognitive Behavioural Therapy for children and adolescents experiencing anxiety disorders – Anna Ćwiklińska-Zaborowicz, Interdisciplinary PhD Studies at University of Social Sciences and Humanities

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Aside from mood disorders, anxiety disorders are the most frequent reason for which children and young people seek therapy. Many parents are also worried about single phobias or developmental fears in their children. Cognitive behavioural therapy is the answer to these patients' needs. The biggest advantages of this approach include its proven effectiveness and the clarity of steps to be taken when the patient suffers from the above mentioned disorders. Therapists may use several treatment procedures describing – step-by-step – how to run each session to reach the therapeutic goals.

The therapeutic programmes available for CBT of anxiety disorders in children and young people are: Coping Cat (individual treatment) and FRIENDS (group therapy).

This presentation provides an overview of the treatment process and describes individual sessions to be used by anyone who works with children suffering from anxiety disorders. It will also present the Polish adaptation of the Coping Cat programme to come out soon onto the Polish market

Paper Session, 14.00-15.45, Hall: Rudniewa

In order to prevent child's death

Child's death as a consequence of abuse and/or neglect – Joanna Włodarczyk, Nobody's Children Foundation

More than half of children's and young people's deaths in Poland are caused by external factors such as unintentional injuries, poisoning, suicide, murder, or events of undetermined intent. The presentation will discuss the problem of abuse and/or neglect as a cause of children's deaths, mainly in the Polish context. The scale of the problem and the main forms of abuse leading to children's deaths will be presented.

Reviewing child deaths in England – Jenny Gray and dr Richard Wilson, UK

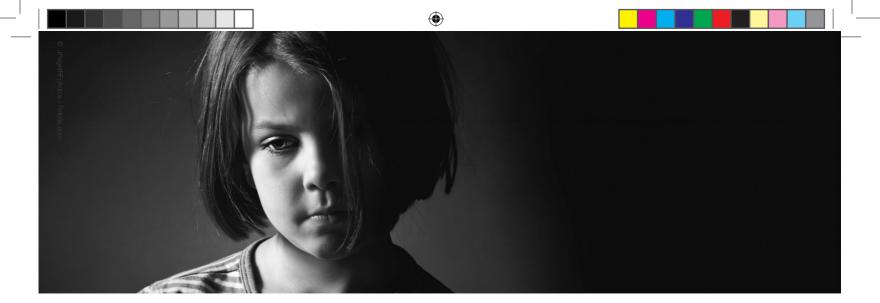
Since 2008, child death reviews have been statutory for all multi-agency Local Safeguarding Children Boards in England. This presentation will describe the legislative and policy context for this new system as well as the processes which are followed when reviewing child deaths. It will also describe the findings from the reviews and the initiatives which have been taken, drawing on these findings, to prevent future child deaths. These include safer sleeping campaigns and traffic calming measures as well as changes to the ways in which services are provided for terminally ill children and bereaved parents.

The process of change in the child protection system: The case of Baby P. - Joanna Gorczowska, Space2grow

Each tragic death of a child killed by his/her caregivers is a trauma for the society and for social services responsible for protecting the child. When we look at any such event from the perspective of a practitioner and a social service worker, we are not only personally touched as humans and professionals, but also provoked to ask questions about its causes and to reflect on how to prevent and reduce the problem. Such reflection is a duty of every conscious society.

In 2007 in the London Borough of Haringey, North London, a 3-year-old boy known as Baby Peter died as a result of longterm maltreatment. All that time the family was supervised by the Haringey social services. In the autumn of 2007 I joined – as a social worker – a team responsible for the assessment and supervision of kinship foster parents in Haringey. Working in the team I could see and directly experience the trauma effect in professionals responsible for supervising Baby Peter's family. The Serious Case Review of the Baby P. case showed great complexity of the case and imperfections in the system, and revealed several gross deficiencies in the work of all the professional teams working with the family. Baby Peter's death led to an in-depth examination of the child protection system in the UK, which generated recommendations for immediate and long-term changes.

My presentation will focus on the analysis of flaws in the British child protection system in the context of Baby P's death and on the recommended changes in child protection procedures and professionals' actions.



Certificate

We hereby certify that Mr/Ms

has participated in the 9th National Conference "Helping Children - Victims of Crime", which took place on 22nd and 23rd October 2012 in Warsaw



MINISTERSTWO SPRAWIEDLIWOŚCI







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