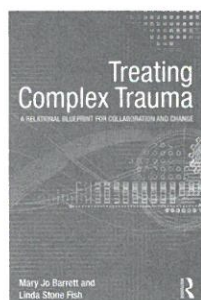


Book Reviews



Treating Complex Trauma: A Relational Blueprint for Collaboration and Change

Mary Jo Barrett and Linda Stone
Fish (2014)
161pp. ISBN: 9780415510219
London: Taylor & Francis
RRP: \$71.99

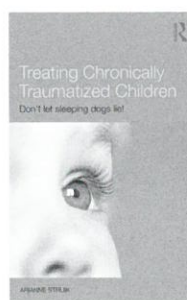
Barrett and Stone Fish are clinicians who have worked extensively in the field of complex trauma. Together they have produced a clinically evaluated and valuable guide for practitioners. *Treating Complex Trauma* outlines the Collaborative Change Model (CCM), which is a structured process that facilitates the collaboration between the client and therapist; however, the structure of CCM does not detract from the need for practitioners to remain flexible. The model outlines a set of tools that have been developed to produce the best possible outcomes for clients. A primary objective of CCM is to help the client move from a survival mindstate to an engaged mindstate in order to promote positive and healthy change.

The book clearly explains a comprehensive model that aims to make therapy consistently more effective and also addresses the real issue of compassion fatigue in practitioners.

The client's experience of trauma is often chaotic and trauma therapy can be an unfamiliar process. CCM provides practitioners with a defined framework that needs to be clearly articulated at the beginning of the therapeutic relationship. There are five fundamental elements to CCM that inform the therapeutic process every step of the way, and each session is divided into three stages that follow the natural stages of growth. CCM provides a set of guidelines that assists the practitioner to develop a safe space where clients are actively involved in the therapy and increases their desire to remain engaged in the therapeutic process.

This book (and the CCM) is a valuable resource for both clinicians who are new to the field and experienced practitioners. It uses client stories to enhance readers' understanding of the model, as well as periodically checking in with the reader to ensure that the concepts are well understood. I would highly recommend *Treating Complex Trauma* to practitioners looking for a structured approach to working with clients.

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Treating Traumatised Children: Don't Let Sleeping Dogs Lie!

Arianne Struik (2014)
204pp. ISBN: 9780415717229
East Sussex, UK: Taylor & Francis
RRP: \$82.99

The title of this book, immediately captures the attention of child trauma practitioners, triggering debate about the "need for trauma narrative" to bring resolution and posttraumatic growth, as opposed to the view that not all people need or benefit from speaking about traumatic exposures and psychic scarring.

This book has its origins within the European fields of trauma work, but weaves our current knowledge of the complex child trauma evidence base from around the world together to form a coherent model for working with those children at the sharpest end of severe trauma exposure and symptoms. Struik states that this is a phased methodology for children with "severe trauma-related symptoms". Few of us work at that end of the spectrum; yet, time after time in reading the case studies I was prompted to identify many similarities to children referred to me, as a school psychologist, under such labels of ADHD, Learning Disabled and Behaviourally Disordered. Struik invites the reader to polish their trauma-sensitive lens.

The Sleeping Dogs method is an adaptation of an adult model. Struik pays homage to the work of Spiering's Three Tests trauma-focused psychotherapeutic model and has developed the Method of Six Tests for children with severe and chronic trauma experiences to measure stabilisation, readiness and ability to enter into the processing work. Struik methodically takes the reader through her theory, practice and case experiences, acknowledging and cautioning when there is not a strong child-based evidence base and embedding practical tasks within a sound theoretical framework. The intervention model partners with the primary carers and treatment commences after a long and careful phase of stabilisation and psychoeducation to allow the child to stay within their window of tolerance, and to safely and effectively process the silos of traumatic experience into a coherent and manageable memory that no longer inexplicably derails their lives and development. So should we wake the sleeping dogs? Sometimes – but with care, knowledge and child-focused evidence to inform practice.

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