

## Location, Dislocation, Relocation (LDR): A New Framework to Work with Young People who have Experienced Multiple Traumas

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### Abstract

This paper uses a narrative approach from which a clinical understanding of trauma is made by using the geographical metaphor of location, dislocation, and relocation. These descriptors encompass the idea of life as a journey where individuals find their sense of being located, dislocated and relocated depending on where they are at. Often with people who have experienced multiple traumas there is a dominant sense of feeling dislocated and therefore the need to think about location and relocation from a clinical perspective.

The location, dislocation and relocation framework is an innovative intervention that enhances clients' wellbeing by improving the therapeutic abilities for all who support and care for them. As well as creating a wider understanding of working with trauma responses and offering coherence for practitioners wanting to use this approach. It creates a common language that is multi-disciplinary and has the potential to create coherence, coordination, and an excellence of care abilities within the whole system.

**Keywords:** *Location, Dislocation, Relocation (LDR); Young People; Multiple Traumas*

### Introduction

Research findings have shown how traumatic experiences are more common than we might have previously thought with the majority of the population having experienced at least one Adverse Childhood Experience (ACE) [1,2]. Some of these traumas experienced before the age of 18 include: violence, abuse, losing a family member to suicide, neglect, having mentally unwell parents, having a parent who is in prison [2]. ACEs impact on the person's mental and physical health and can have long lasting effects with significant changes in the structure, maturation and functionality of specific brain regions such as the prefrontal cortex [3] amygdala [4], the bilateral inferior frontal gyrus and right anterior cingulate cortex [5].

Due to the above, there is an urgent need for a coherent and consistent approach for all systems to work with young people who have experienced multiple traumas by also using a common language.

Among the young people who are more exposed to trauma, there are the following groups: looked after children [6], unaccompanied minors [7] and previously looked after children which includes adopted children [8,9].

### The framework development

The framework, here presented, is named 'Location, Dislocation and Relocation' (LDR). It uses a geographical descriptor that creates the inter-determinacy between a sense of being located, dislocated, and relocated. We decided to use geography because it links the past to the present and to the future by providing us with knowledge about the past which guides our understanding about the present and decisions about the future. The LDR is about this bridge between these three temporal spaces (past, present, future). Life stories are lived and told and there is a circular process in the patterns that emerge and the future possibilities that are available in coordination and response to these stories in the present [10,11].

In designing the LDR framework, the theoretical ground stands upon narrative and constructivist ideas which support the situated understanding of young people's life, the transitions and punctuations they experience and relationships within a context that is not pathologising.

The authors have often highlighted in conference's presentations of the LDR framework that a person is always in this constant process of locating, dislocating and finding ways of relocating ourselves. One can experience the three aspects throughout the same day. For instance, a young person can feel located when they wake up at home, in their familiar environment with well-known noises and routines. Perhaps they might feel dislocated about going to school and therefore they could relocate themselves by seating at their favourite spot in the classroom, or next to a classmate they are friends with. They might have headphones to block noise when the alarm goes off, or they might use some fidgeting toys to regulate when learning a subject they do not like. The premise therefore is that we all experience dislocation and that we all have locating stories from which we can relocate ourselves. There is therefore a normalising of the experience of dislocation and a reduction in the stigma associated with dislocations that can and do take place.

The aim of the LDR framework is to bring together different narratives rather than reducing someone to one story. In doing this they become resources with multiple possibilities from which they can thrive. When trauma is the only story told, as a system we are imprisoning and othering someone to an identity that is defined by the adverse childhood experiences they have had, which in turn hampers future possibilities. In this, the LDR Framework aims to support clinicians to think about the situated meanings and to begin to create a common language that supports coherence, coordination, and an increase in care abilities within the system and those professionals that use it.

After the first publication [12] the framework has been presented by these authors in Europe and Australia. The authors have also delivered the LDR framework as a training course to diverse local authorities in the UK and colleagues abroad. This framework was applied to clinical work with adopted children, unaccompanied minors, refugees and looked after children by different organisations. Therefore, the LDR framework is in an ongoing place of evolution, with these authors continuously working on further developing the theoretical and practical aspects of it. In its evolution the authors have given particular attention to the outcome and evidence base of its application [13-18].

### The LDR framework; three descriptors and their meaning

#### Location

Location has an open and extended and situated meaning, therefore it is a process rather than a fixed position. The linguistic used is the could and would where possibilities are available and the person can look at these possibilities as a resource from which they can re-experience a sense of location. There is no fixed story or way of knowing a location, but rather the meaning is co-created as a resource from which a re-location can take place.

In this framework, a person who has experienced trauma, or has a diagnosis, for instance, of attention deficit hyperactivity disorder (ADHD) will not be seen as one identity but will have multiple ways of being and expressing their sense of self. Identity is an ever shifting

and evolving story, from which the language we use becomes a key component to the stories available and being told. Maslow [18] talks about this when he states: “If the only tool you have is a hammer, it is tempting to treat everything as if it were a nail”.

By default, the traditional way of working someone with ADHD would be defined as: deficit, hyperactive, impulsive, oppositional, rebellious, unfocused. In the LDR framework, we would consider new ways of describing attributes about the person, for example they hold strong beliefs and are determined, they are also energetic and passionate about many things. They can at times be spontaneous and instinctive, they are multitasking and they can pay attention to many things. Therefore, the descriptions have plurality and new meaning can emerge about the person who is being described. That said, this framework is not about a linguistic binary, but rather a shift and movement from which many descriptions can co-exist.

When using the LDR framework, it becomes fundamental to pay attention to a person’s ‘sense’ of location as this is where we often find hidden and untold stories. Location is a place with many different types of stories that when crafted together, shape new possibilities of wellness. Only by knowing what location looks like in context and resources found in that terrain, can we support someone to have the possibility and ability to relocate, without these resources, we imprison someone to remaining in a dislocated terrain.

### Dislocation

The traditional model of trauma is based on a grand narrative. This can be defined as an institutional and ideological form of knowledge from which meaning is shaped and understanding created [20]. The medicalised model of trauma positions people into a narrative without any situated meaning. The person who experienced trauma becomes the trauma itself and is labelled by that experience. The linguistics become a dislocated one, e.g. ‘You have Post-Traumatic Stress Disorder (PTSD)’; ‘you are bipolar’. The speech itself gives meaning from which the other responds. In the process we create a single identity, we become defined by the descriptions we are given and that crafts who we are and can be.

This way of describing someone’s behaviour becomes reductive and harmful as the traumatic event becomes the main descriptor of a person’s life. It does not reflect contextualised meaning, or other stories of resources, abilities, wellness, agency and control. A bi-product of this is that we create environments and systems that are isomorphic and reflect back to the person a fixed way of describing their experience and identity.

The traditional way of working starts from a place of dislocation which is the privileged story making dislocation as the gateway to meet an access criteria for a certain service and to receive care. The way our system is commissioned creates a binary terrain of can and can’t, will and won’t, there is nothing to explore as everything is already defined and limited. It is, therefore, led by the principle of original cause and determinant. Furthermore, this dislocated language becomes a grand narrative that is further exacerbated by the original cause, but also the type of diagnostic prescription that is used to define who we are and can be. In this dislocated terrain, whenever we describe a young person as ‘complex’, ‘difficult to engage’, ‘challenging’, ‘misbehaving’, we are already in a place of hopelessness and powerlessness in which they struggle to do anything other than what is described of them.

### Relocation

Relocation is about using the pre-existing resources of the client and applying them into the present. It is therefore about listening to the untold stories, unfolding them into the present and finding new ways to connect, relate and have hope. Relocation is therefore an active intent to move away from a single story, not just for the individual, but also for the system.

Draper and Marcellino first described some of these therapeutic tools in their chapter ‘An early intervention framework for emotional health and wellbeing of unaccompanied minors’ published by the Oxford textbook of Migrant Psychiatry in 2020. Following this, Continuing Bonds Enquiry [16], Fast Feet Forward [14,15] and the Distress Screening Tool [17] were also published.

## Conclusion

The NHS Long Term Plan [21] for mental health has made a renewed commitment to improve and widen access to care for children and adults needing mental health support. This way of working helps children, young people and their families receive the care they need, where they want it and with people they already know and trust.

There is still a clear danger of a single story within the system. Single stories often originate from simple misunderstandings or one's lack of knowledge of others [22].

The LDR is a whole systems approach with prevention, promotion, and a commonality of language at the heart of this framework. It also links to personal recovery models in that it supports relational connectedness to take place, it is hopeful, it is based on identity and meaning, as well as empowerment.

Finally, it is important to also consider the wider impact on the public health and mental health management [23] of using this framework and whether there may be a possible positive impact on the neuro-immune and biochemical/metabolic intersections of using the LDR framework with young people. This could be a more cost-effective framework to work with people of different age-brackets and ethnicities worldwide [23].

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