

**Improving Parent-Child Relationships for Families
in the Shadow of Complex Trauma**

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Thesis submitted in fulfilment of the requirements for the degree of

Doctor of Philosophy (Clinical Psychology)

under the supervision of:

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Certificate of Original Authorship

I, Jacqueline Kemmis-Riggs declare that this thesis, is submitted in fulfilment of the requirements for the award of Doctor of Philosophy (Clinical Psychology), in the Graduate School of Health at the University of Technology Sydney.

This thesis is wholly my own work unless otherwise referenced or acknowledged. In addition, I certify that all information sources and literature used are indicated in the thesis.

This document has not been submitted for qualifications at any other academic institution.

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It has been my honour to work with the young parents and their children who participated in our parenting intervention and I would like to acknowledge the special place they will always have for me. Their courage, perseverance and resilience in the face of hardship is inspiring. I thank you all for your involvement in this project – without your input this work would not have been possible.

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At its core, this thesis is about strengthening family relationships to create safe, nurturing foundations for children to thrive. So a very special mention goes to my own family, my parents and sisters, who provided me with a strong foundation and continually surround me with love, care, and support. And most importantly, I would like to acknowledge my beautiful children, Isaac, Toby and Harriet, who are kind, compassionate, smart and funny. You are the reason I care so much about strengthening attachment relationships and I am absolutely crazy about you all. And finally, to my wonderful husband Andrew, I know neither of us anticipated I would be 'at university' for quite this long when I first started my undergraduate degree, yet your patience,

generous support, stability, care, encouragement and love has been never-ending. I am very thankful.

Statement of Thesis Format

The present work is in the format of thesis by compilation, including a mixture of published and unpublished works. The content of manuscripts of published papers is identical to the published versions.

List of Publications/Papers

Study 1 ([Chapter 2](#)) - Early Parenting Characteristics associated with Internalising Symptoms across Seven Waves of the Longitudinal Study of Australian Children

Kemmis-Riggs, J., Grove, R., McAloon, J., & Berle, D. (2020). Early parenting characteristics associated with internalizing symptoms across seven waves of the longitudinal study of Australian children. *Journal of Abnormal Child Psychology*, 48(12), 1603-1615. <https://doi.org/10.1007/s10802-020-00700-0>

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Additional Publications

During the course of completing this PhD, two additional papers were published. While not included in the body of the thesis, they are relevant to this body of work as they demonstrate an ongoing commitment to the development and translation of an evidence base in the area of complex trauma and alternative care.

Dickes, A., Kemmis-Riggs, J., & McAloon, J. (2018). Methodological challenges to the evaluation of interventions for foster/kinship carers and children: A systematic review. *Clinical Child and Family Psychology Review*, 21(2), 109-145. <https://doi.org/10.1007/s10567-017-0248-z>

Kemmis-Riggs, J., & McAloon, J. (2020). A narrative review of the needs of children in foster and kinship care: Informing a research agenda. *Behaviour Change*, 1-10. <https://doi.org/10.1017/bec.2020.11>

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Study 1 ([Chapter 2](#)) – Published

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The conceptual design was developed by all authors. DB and RG were involved with statistical analyses and with the interpretation of data. JKR prepared the bulk of the manuscript, although all authors contributed and were involved in reviewing and editing the manuscript.

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Study 4 ([Chapter 8](#)) – Prepared for publicationContributors:

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manuscript, which was then revised by JKR throughout the research series. The manual was also reviewed by JM. JKR created the participant materials with input from AD.

Remaining Chapters ([Chapter 1](#), [Chapter 3](#), [Chapter 5](#), [Chapter 7](#) and [Chapter 10](#))

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All chapters were written by JKR and reviewed by JM, with some reviewed by DB.

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Definitions

Throughout this body of work, both complex trauma and child maltreatment are discussed in detail. These are defined below.

Complex Trauma

Complex trauma, also known as developmental trauma, is defined as:

The experience of multiple and/or chronic and prolonged, developmentally adverse traumatic events, most often of an interpersonal nature and early-life onset. These exposures often occur within the child's caregiving system and include physical, emotional, and educational neglect and child maltreatment beginning in early childhood (Van der Kolk, 2005, p.2)

A new diagnosis of complex post-traumatic stress disorder (CPTSD) will be recognised in the International Classification of Diseases, 11th Edition (ICD-11), consisting of six symptom clusters. This includes the three clusters included in PTSD (reexperiencing, avoidance, and hypervigilance) with the addition of three disturbances of self-organisation; affect dysregulation, negative self-concept and interpersonal problems. This thesis focusses on the impact of the experiences of complex trauma, with particular emphasis on parenting, rather than direct treatment of CPTSD.

Child Maltreatment: Abuse and Neglect

The World Health Organisation (2016) defines child maltreatment as:

The abuse and neglect that occurs to children under 18 years of age. It includes all types of physical and/or emotional ill-treatment, sexual abuse, neglect, negligence and commercial or other exploitation, which results in actual or potential harm to the child's health, survival, development or dignity in the context of a relationship of responsibility, trust or power.

Abstract

Children develop in an environment of caregiving relationships, which provide the foundation for ongoing development. In contrast to safe, secure and nurturing caregiving relationships, complex trauma is the experience of multiple or prolonged developmentally adverse traumatic events that occur within the child's caregiving system, such as child maltreatment and exposure to domestic violence. Complex trauma is recognised as a source of toxic stress, which potentially leads to disruptions in the developing brain and other systems. This thesis argues that, of all of the profound impacts that complex trauma has on wellbeing, the impact on child socio-emotional and relational development is the most critical. These impacts have consequences not only for the short-term, but in the longer term, when children who have experienced complex trauma become parents themselves. Young parents and their children are at particular risk of poor outcomes and have been identified as a highly vulnerable group with specific needs related to their developmental stage and socioeconomic disadvantage. To achieve improved outcomes for young parents and their children, effective and accessible parenting support must be provided. However, few parenting interventions have been developed specifically for young parents with these experiences. Thus, the overarching goal of this study series was to develop and pilot a parenting intervention that meets the complex needs of young parents who have experienced early adversity, to intervene in intergenerational cycles of trauma through a series of five studies. In order to understand these impacts, and improve support for parents and children who have experienced maltreatment and associated trauma, this thesis uses a biobehavioural and attachment framework. First, a longitudinal study in a normative population provides insight into the influence of parenting on one aspect of child socio-emotional development, while the second study systematically reviews parenting interventions in

alternative care to provide a broader picture of how to help biological parents meet the needs of their own children who have experienced complex trauma. The third study involves young parents in the development of our parenting intervention by eliciting their views and experiences through an online survey. The final two studies present the rationale, outline, implementation and preliminary evaluation of the intervention, *Holding Hands Young Parents (HHYP)*, through a series of single-case experimental designs. Promising preliminary findings demonstrate that HHYP benefited young parents and their toddlers and also reinforce the need for ongoing treatment based-research for young parents with a history of early adversity.

Keywords: Child maltreatment, adverse childhood experiences, teenage parents, intervention, parenting