



Working with Children Who Have Been Traumatized

As caregivers, we often care for kids who may have experienced the trauma of physical and sexual abuse, neglect, and domestic violence.

While experiencing or witnessing physical or sexual abuse is a common source of trauma for children, the emotional turmoil of being removed from their parental home is additionally traumatic and stressful. When we as caregivers, therapists, and school staff have an understanding of the trauma and its effect on learning and processing, children in our care have a better chance to overcome their past.

Recognizing Symptoms

Emotional, behavioral, and physical delays may be noted in traumatized children. The brain development is altered, resulting in children having difficulty controlling emotions and behavior.

In reaction to chronic abuse, a hyperarousal response in the brain may cause persistent stress. Abused and neglected children may become wired to experience the world as hostile and an uncaring place.

They may recreate the traumatic event or experience some of the following symptoms:

- Anxiety
- Sleep disturbances
- Aggression
- Withdrawal
- Hyperactivity
- Persistent levels of fear

You should contact a mental health professional if your children experience the following symptoms:

- Flashbacks
- Episodes of being easily startled
- Emotional numbness
- Episodes of a racing heart and sweating (unrelated to exercise)
- Depression
- Suicidal thoughts or actions

Finding a therapist that you and your children trust is imperative with working with kids who have PTSD and other trauma—as much for your own sake as for the sake of your children. As a caregiver, you should be comfortable in sharing your own observations of

your child, as well as accepting insight and support from a therapist.

Often it takes a lot of time to help kids overcome the trauma of their pasts, and it's often hard to see the very real progress we're making by letting the child live in a safe and consistent home.

Interventions for Caregivers

The response you have on traumatized children has a definite impact on them. Being calm, organized, and in control reassures children that they are in a safe place.

- Develop a daily routine and prepare children for events of the day. Unexpected changes can often set children with traumatic backgrounds into a tailspin.
- Set gentle but firm limits for behavior by setting consistent, clear rules and consequences. ("You may ride your bike to the store and be home at 4:00 p.m.")
- Develop non punitive consequences for their behavior. ("There will be no bike riding this afternoon since you were late yesterday coming home from the store.")
- Take time to listen to your children.
- Give children choices and a sense of control by allowing them to make as many choices as possible. ("You may choose either the blue shorts or the jean shorts to wear today.")
- Make only promises that can be kept. ("Tonight we will roast some hotdogs on the fire.") Follow through helps develop trusting relationships.
- Nurture and comfort through touch and conversation. Pay attention to how the children respond to physical touch and adjust your response and boundary setting accordingly.

Meeting the Children's Needs

Children who have been traumatized often function at varying levels behaviorally, emotionally and physically. At what level of development are the children in your care displaying?

Acknowledge this functioning level and parent them accordingly in order to meet their special needs.

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Often children who have been exposed to abuse, neglect or violence are emotionally and behaviorally immature, express strong emotions and may have physical delays.

Some effective ways to meet the exceptional needs of traumatized children include the following:

- Let children know that having powerful emotions such as fear, sadness, anger, pain, and rage is okay.
- Follow the children's lead and let them talk, draw and write about the trauma. Share this information with the children's treatment team.
- If children seem to be upset or show increased symptoms during certain activities, end the activities. Often a smell, a place, a food or a sound can trigger a reminder of the past trauma and symptoms can resurface.
- Keeping a log or journal of behaviors can be useful in further assessment and treatment when shared with the children's treatment team.

- Be a role model and teach appropriate social behaviors and physical boundaries.
- Minimize long physical separations from your children. Take time to prepare children for separations and of your return. ("I will be going to a meeting tonight at 6 pm. Mary will take care of you at the house. I will be home by 8 o'clock and see you before bedtime.")
- Be patient. Remember that the impact of trauma on children can have long term effects, some of which may last for years.
- Continue to educate yourself about the issues of trauma and their effect. You are an important part of the treatment team.
- Provide insight into the day-to-day care of your children by communicating often with the child's social worker, teacher, therapist, psychiatrist, and other treatment team members.



Resources Available From the FCARC Lending Library

<http://wifostercareandadoption.org/plugins/library/advancedsearch.asp>

- [*Legacy of Childhood Trauma: Not Always Who They Seem \(VHS\)*](#) This video features the stories of four young adults who are survivors of various types of childhood trauma. They share their anger, pain, guilt, and shame as they discuss their childhood and teenage years and reveal how, with the help of caring adults, they were able to salvage their lives and end the cycle of abuse.
- [*Understanding Childhood Trauma: Identifying & Responding to Childhood Trauma \(DVD\)*](#) Segments in this program include determining the trauma, guidelines for caregivers, non-verbal interaction, significant loss, dissociating, being an example and acceptance. Emphasis is given on how to intervene to build trust and provide guidance, predictability and support.
- [*Brain: Effects of Childhood Trauma \(DVD\)*](#). This program offers caregivers, teachers, and healthcare providers suggestions for avoiding and dealing with damage to the brain from emotional trauma, with primary emphasis being placed on prevention and timely intervention. 29 minutes. (Workbook included.)
- [*Rebuilding Attachments With Traumatized Children Description \(book\)*](#). This book presents critical information on how to understand and surmount the impact of loss, neglect, separation, and violence on children's

development, how to discover and foster strengths in children and their families, and how to rebuild enduring connections and hope with children who are at risk of harm to themselves and others.

... and much more at the FCARC Lending Library. (Search for trauma.)

Resources Used for this TipSheet

- *Bonding and Attachment in Maltreated Children, How Abuse and Neglect in Childhood Impact Social and Emotional Development.* Dr. Bruce Perry. <http://www.childtrauma.org/ctamaterials/bonding.asp>.
- *Special Considerations for Parents, Caregivers, and Teachers* by Dr. Bruce Perry. http://www.childtrauma.org/ctamaterials/principles_TC.asp.
- *For Parents of Children Exposed to Violence or Disaster What Parents Can Do* from the National Institute of Mental Health, <http://www.nimh.nih.gov/health/publications/helping-children-and-adolescents-cope-with-violence-and-disasters-what-parents-can-do.shtml>.
- *Finding the Real Child*, Texas Christian University magazine. <http://www.magazine.tcu.edu/articles/2006-01-cv.asp>.
- *Creating Safe Places for Our Children* by Karyn Purvis, PH.D. and David Cross, Ph.D., http://www.child.tcu.edu/Secondary%20Pages/Published%20article_Creating%20Safe%20Places.pdf.