


Parenting Teens With Trauma


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In partnership with COPARC

Who Are You and Why Are You Here?

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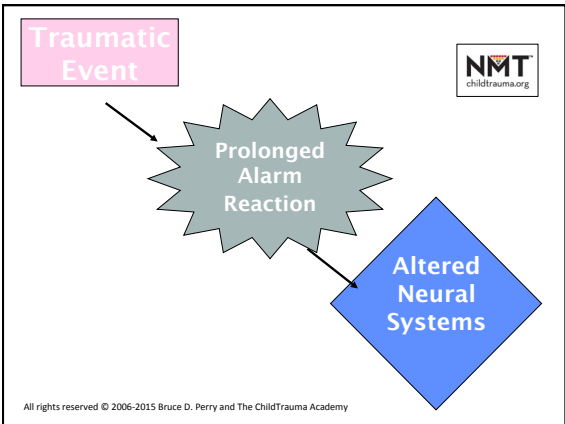
What is Traumatic?




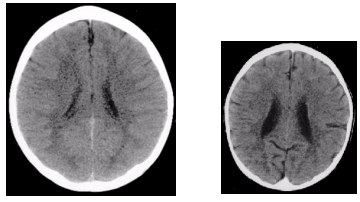
The same event can be experienced, adapted to, and carried forward in different ways by different children. So, it is the response by the individual to the experience or event that is "traumatic" - not the event itself.

-Dr. Bruce Perry

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Effects of Neglect



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The Brain Matters

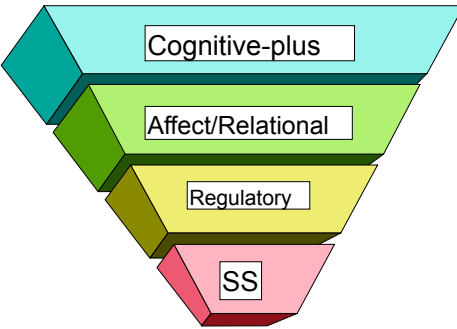


- 90% of the brain is organized in the first two years of life
- Experiences in the first two years of life have more impact on development than other life experiences
- "We are unable to engage in random actions because our behaviors are guided by patterns established through previous learning to which we automatically return." ~Louis Cozolino

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Brain Development

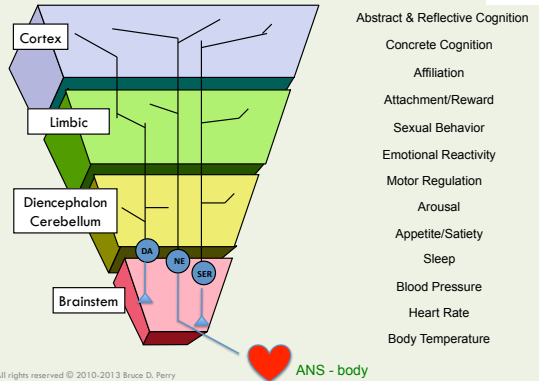




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Efferent Distribution of Primary Regulatory Networks




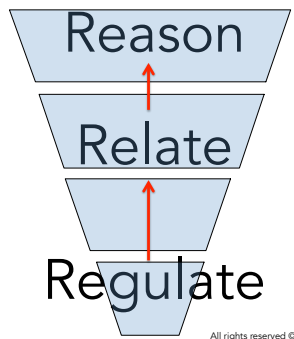


- Abstract & Reflective Cognition
- Concrete Cognition
- Affiliation
- Attachment/Reward
- Sexual Behavior
- Emotional Reactivity
- Motor Regulation
- Arousal
- Appetite/Satiety
- Sleep
- Blood Pressure
- Heart Rate
- Body Temperature

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Sequence of Engagement





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You can't fight physiology!



What happens?

- Heart Rate Increases
- Dissociation versus Arousal
- Somatic Complaints
- Lack of Self-Regulation
- Lack of Empathy
- Increase in Peer Problems
- Escalation in Difficult Behaviors
- Decrease in Homework Completion
- Lack of Focus and Concentration
- Increased Absences

Strategies You Can Use

Core elements of positive developmental, educational and therapeutic experiences – i.e., “trauma-informed” & developmentally respectful



- Relational (safe)
- Relevant (developmentally-matched)
- Repetitive (patterned)
- Rewarding (pleasurable)
- Rhythmic (resonant with biology)
- Respectful (child, family, culture)

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Strategy #1: Be a Crisis Responder



Strategy #2: Focus on Safety

- Emotional Safety-is the child's/youth's perception that there are safe people in their lives?
- Physical Safety-manipulate the environment so that the child/youth feels safe, be aware of your physical proximity when talking to the child/youth...what is the power differential?
- Children/Youth need to know that their needs are being met and people around them will keep them safe.
- Children/Youth may need help sorting out what is occurring in social situations because they do not understand them.

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Strategy #3: Build trust and relationship

- If you can't trust a child/youth, that child/youth may not be able to trust you.
- Building trust is one of the first developmental stages that a child experiences. Many children/youth with trauma have fractured trust with adults. This means that you will have to work harder to build that trust.
- Eye contact can be threatening to some children/youth.

Strategy #4: Somatosensory Breaks

- The lowest and first part of the brain to develop is the Brainstem which is responsible for the somatosensory activities in the brain.
- If a child/youth is becoming escalated or struggling to stay focused, a somatosensory break may help the brain to regulate.
- What need is Sex, Alcohol, and Drugs meeting?
- Occupational Therapy breaks
- Fidget Toys
- Cloth on the desk
- Rock in the pocket
- Listening to music while learning
- Recess

Sensory-Grounding and Centering -Linda Curran

- ▶ Sight
 - ▶ Clock/Calendar
 - ▶ Photographs
 - ▶ Looking at your surroundings
- ▶ Sound
 - ▶ Soothing music
 - ▶ Nature sounds
 - ▶ Familiar sounds
 - ▶ Sing aloud
 - ▶ Read aloud
 - ▶ Pray
- ▶ Taste
 - ▶ Drop of clove oil
 - ▶ Flavored toothpicks
 - ▶ Altoids
- ▶ Smell
 - ▶ Essential oils
 - ▶ Incense
 - ▶ Body lotion/perfume
- ▶ Touch
 - ▶ Smooth/textured stone
 - ▶ Ice cube
 - ▶ Blanket or cloth

Strategy #5: Time In versus Time Out

- A child/youth will never learn self-regulation if not taught and modeled.
- A child/youth needs to be regulated externally (by someone on the outside) before being regulated internally (by himself).
- Patterned, repetitive activities
- Build in positive touch

Strategy #6: Empathy

- Empathy
- Empathy
- Empathy
 - See life through the eyes of a child/youth!
- LISTEN to the child's/youth's journey and how they got to the state that they are in that day.
- Forgiveness is a part of this!

Strategy #7: Recognize that misbehaviors are symptoms

- Misbehaviors serve a purpose for children/youth and can be symptomatic of the trauma that child/youth has experienced.
- Try not to focus on the behavior. If you know what the cause of the behavior is, focus on that.
- Understand anger versus fear. Your approach with a scared child/youth is much different than an angry child/youth.

Strategy #8: Be proactive!

- Identify patterns of misbehavior that occur over and over, then problem solve how to change these
- Neurofeedback loops
- Perhaps a child/youth blows out at every morning recess or cries during an extra-curricular activity, etc.
- Homework, homework, homework

Strategy #9: Treatment Teams

- Children/youth who present with traumatic symptoms can be very difficult to work with.
- Lean on each other!
- Build a support team for this child/youth and the family!
- Meet regularly, even if it's only 15 minutes a week to evaluate and process how things are going.

Strategy #10: Have Fun!

- This is an underrated part of working with traumatized children/youth.
- Traumatized children/youth receive less positive interactions than other children.
- A traumatized child/youth can struggle to have fun and this can be threatening. However, through building a relationship and maintaining trust teaching a child/youth how to have fun can be a positive thing for you and the child/youth!

**Engaging
Parents
and
Caregivers**

**Listen Openly
Remain Focused
On The Child/
Youth
Deal Directly
With Any Problems**

**Recognize that
Schools/Mental
Health Agencies/
Etc. Can Be
Intimidating and
Overwhelming To
Caregivers
Find
Common
Ground**



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