

INTEGRATING THE 12 CORE CONCEPTS OF UNDERSTANDING CHILD TRAUMATIC STRESS INTO YOUR WORK

Part 1

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"They say music can make employees more productive. Get back to work or I'll start singing!"

Core Concept 1 -Inherent Complexity

- Every traumatic event- even events that are relatively circumscribed- is made up of different traumatic moments. These moments may include varying degrees of objective life threat, physical violation, and witnessing of injury or death. Trauma- exposed children experience subjective reactions to these different moments that include changes in feelings, thoughts, and physiological responses; and concerns for the safety of others. Children may consider a range of possible protective actions during different moments, not all of which they can or do act on. Children's thoughts and actions (or inaction) during various moments may lead to feelings of conflict at the time, and to feelings of confusion, guilt, regret, and/or anger afterwards. The nature of children's moment- to-moment reactions is strongly influenced by their prior experience and developmental level. Events (both beneficial and adverse) that occur in the aftermath of the traumatic event introduce additional layers of complexity. The degree of complexity often increases in cases of multiple or recurrent trauma exposure and in situations where a primary caregiver is a perpetrator of the trauma.

Core Concept 2: Broad Context

- Childhood trauma occurs within the broad ecology of a child's life that is composed of both child-intrinsic and child-extrinsic factors. Child-intrinsic factors include temperament, prior exposure to trauma, and prior history of psychopathology. Child-extrinsic factors include the surrounding physical, familial, community, and cultural environments. Both child- intrinsic and child-extrinsic factors influence children's experience and appraisal of traumatic events; expectations regarding danger, protection, and safety; and course of post-trauma adjustment. For example, both child-intrinsic factors such as prior history of loss, and child- extrinsic factors such as poverty may act as vulnerability factors by exacerbating the adverse effects of trauma on children's adjustment.

Core Concept 3: Secondary Adversities

- Traumatic events often generate secondary adversities such as family separations, financial hardship, relocations to a new residence and school, social stigma, ongoing treatment for injuries and/or physical rehabilitation and legal proceedings. The cascade of changes produced by trauma and loss can tax the coping resources of the child, family and broader community. These adversities and life changes can be sources of distress in their own right and can create challenges to adjustment and recovery. Children's exposure to trauma reminders and loss reminders can serve as additional sources of distress. Secondary adversities, trauma reminders and loss reminders may produce significant fluctuations in trauma survivors' post-trauma emotional and behavioral functioning.

Core Concept 4: Wide Reaction Range

- Trauma-exposed children can exhibit a wide range of post-trauma reactions that vary in their nature, onset, intensity, frequency, and duration. The pattern and course of children's post-trauma reactions are influenced by the type of traumatic experience and its consequences, child-intrinsic factors including prior trauma or loss, and the post-trauma physical and social environments. Posttraumatic stress and grief reactions can develop over time into psychiatric disorders, including posttraumatic stress disorder (PTSD), separation anxiety, and depression. Posttraumatic stress and grief reactions can also disrupt major domains of child development, including attachment relationships, peer relationships, and emotional regulation, and can reduce children's level of functioning at home, at school, and in the community. Children's post-trauma distress reactions can also exacerbate preexisting mental health problems including depression and anxiety. Awareness of the broad range of children's potential reactions to trauma and loss is essential to competent assessment, accurate diagnosis, and effective intervention.

Taking it Home: Action Plans

- Inherent Complexity
- Broad Context
- Secondary Stress
- Wide Reaction Range

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Core Concept 5: Safety Concerns

- Traumatic experiences can undermine children's sense of protection and safety, and can magnify their concerns about dangers to themselves or others. Ensuring children's physical safety is critically important to restoring the sense of a protective shield. However, even placing children in physically safe circumstances may not be sufficient to alleviate their fears or restore their disrupted sense of safety and security. Exposure to trauma can make it more difficult for children to distinguish between safe and unsafe situations, and may lead to significant changes in their own protective and risk-taking behavior. Children who continue to live in dangerous family and/or community circumstances may have greater difficulty recovering from a traumatic experience.

Safety Concerns: Activity

- In your small groups draw a child who has experienced trauma.
- Draw some details about the child, her/his history and his/her situation
 - Intrinsic and extrinsic factors
 - Secondary adversities\
 - Reactions to the trauma
- Be sure to NAME the child
- Highlight the SAFETY CONCERNS for this child
 - Include PHYSICAL Safety Concerns
 - Include PSYCHOLOGICAL Safety Concerns

Core Concept 6: Caregiving Systems

- Children are embedded within broader caregiving systems including their families, schools, and communities. Traumatic experiences, losses, and ongoing danger can significantly impact these caregiving systems, leading to serious disruptions in caregiver-child interactions and attachment relationships. Caregivers' own distress and concerns may impair their ability to support traumatized children. In turn, children's reduced sense of protection and security may interfere with their ability to respond positively to their parents' and other caregivers' efforts to provide support. Traumatic events- and their impact on children, parents and other caregivers- also affect the overall functioning of schools and other community institutions. The ability of caregiving systems to provide the types of support that children and their families need is an important contributor to children's and families' post-trauma adjustment. Assessing and enhancing the level of functioning of caregivers and caregiving systems are essential to effective intervention with traumatized youths, families and communities.

Caregiving Systems Activity

FAMILY

- Draw the child's family
- Consider how the child's trauma impacts the caregivers' own reactions
- Consider how the trauma impacts the relationship between child and caregiver

SYSTEMS

- Draw the systems that care for child (e.g. school, church, court, community)
- Consider how the trauma impacts the system(s) caring for the child
- Consider how the trauma impacts the relationship between the child and the system(s)

Core Concept 7: Protective and Promotive Factors

- Protective factors buffer the adverse effects of trauma and its stressful aftermath, whereas promotive factors generally enhance children's positive adjustment regardless of whether risk factors are present. Promotive and protective factors may include child-intrinsic factors such as high self-esteem, self-efficacy, and possessing a repertoire of adaptive coping skills. Promotive and protective factors may also include child-extrinsic factors such as positive attachment with a primary caregiver, possessing a strong social support network, the presence of reliable adult mentors, and a supportive school and community environment. The presence and strength of promotive and protective factors- both before and after traumatic events- can enhance children's ability to resist, or to quickly recover (by resiliently "bouncing back") from the harmful effects of trauma, loss, and other adversities.

Protective and Promotive Factors

Three PROTECTIVE factors



Three PROMOTIVE factors



Taking it Home: Action Plans

- Safety Concerns
- Caregiving Systems
- Protective and Promotive Factors

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Core Concept 8: Developmental Impact

- Trauma and post-trauma adversities can profoundly influence children's acquisition of developmental competencies and their capacity to reach important developmental milestones in such domains as cognitive functioning, emotional regulation and interpersonal relationships. Trauma exposure and its aftermath can lead to developmental disruptions in the form of regressive behavior, reluctance, or inability to participate in developmentally appropriate activities, and developmental accelerations such as leaving home at an early age and engagement in precocious sexual behavior. In turn, age, gender, and developmental period are linked to risk for exposure to specific types of trauma (e.g. sexual abuse, motor vehicle accidents, and peer suicide.)

Developmental Impact Activity



Choose a developmental phase, identify the stage's developmental milestones and hypothesize how those developmental tasks would be impacted by trauma

Core Concept 9: Neurobiology

- Children's capacities to apprise and respond to danger are linked to an evolving neurobiology that consists of brain structures, neurophysiological pathways, and neuroendocrine systems. This "danger apparatus" underlies appraisals of dangerous situations, emotional and physical reactions, and protective actions. Traumatic experiences evoke strong biological responses that can persist and that can alter the normal course of neurobiological maturation. The neurobiological impact of traumatic experiences depends in part on the developmental stage in which they occur. Exposure to multiple traumatic experiences carries a greater risk for significant neurobiological disturbances including impairments in memory, emotional regulation, and behavioral regulation. Conversely, ongoing neurobiological maturation and neural plasticity also create continuing opportunities for recovery and adaptive developmental progression.





Core Concept 10: Interwoven Culture

- Culture can profoundly affect the meaning that a child or family attributes to specific types of traumatic events such as sexual abuse, physical abuse and suicide. Culture may also powerfully influence the ways in which children and their families respond to traumatic events including the ways in which they experience and express distress, disclose personal information to others, exchange support, and seek help. A cultural group's experiences with historical or multigenerational trauma can also affect their responses to trauma or loss, their world view, and their expectations regarding the self, others, and social institutions. Culture also strongly influences the rituals and other ways through which children and families grieve over and mourn their losses.

Core Concept 11: Social Contract

- Traumatic experiences often constitute a major violation of the expectations of the child, family, community and society regarding the primary social roles and responsibilities of influential figures in the child's life. These life figures may include family members, teachers, peers, adult mentors, and agents of social institutions such as judges, police officers, and child welfare workers. Children and their caregivers frequently contend with issues involving justice, obtaining legal redress and seeking protection against further harm. They often acutely aware of whether justice is properly served and the social contract is upheld. The ways in which social institutions respond to breaches of the social contact may vary widely and often take months or years to carry out. The perceived success or failure of these institutional responses may exert a profound influence on the course of children's posttrauma adjustment, and on their evolving beliefs, attitudes, and values regarding family, work and civic life.

Core Concept 12: Providers in Distress

- Mental healthcare providers must deal with many personal and professional challenges as they confront details of children's traumatic experiences and life adversities, witness children's and caregiver's distress and attempt to strengthen children's and families' belief in the social contract. Engaging in clinical work may also evoke strong memories of personal trauma- and loss- related experiences. Proper self- care is an important part of providing quality care and of sustaining personal and professional resources and capacities over time.