WHY ARE WE HERE TODAY?
EVERY CHILD IS BORN WITH THE BEAUTIFUL POTENTIAL TO BECOME WONDERFUL HUMAN BEINGS WHO EXPERIENCE LOVE, JOY, GROWTH AND MAKE POSITIVE CONTRIBUTIONS TO THEMSELVES, THE PEOPLE THEY LOVE, AND TO ALL MEMBERS OF SOCIETY...

SOMETIMES THINGS OCCUR IN CHILDREN’S LIVES THAT CAN INTERFERE WITH CHILDREN’S ABILITIES TO REACH THEIR BEAUTIFUL POTENTIAL... SUCH AS CHILD ABUSE, NEGLECT, VIOLENCE, LOSS, WARS, OPPRESSION, RACISM, SEXISM, POVERTY, AND OTHER ADVERSITIES...
THERE ARE THINGS WE CAN DO TO HELP...

SAVING PRIVATE RYAN AND JAMES AND JAMIE...Saving lives and promoting resiliency with Trauma-Informed Care

KRYSTINE BUFFINGTON, MSW, LISW-S
kbuffington46@hotmail.com
Goal of this presentation: To inspire understanding, hope, and action through the life story of a young man who has experienced trauma and who has begun to transcend...

Learning Objectives
• Increase understanding of developmental impact of complex trauma
• Debunk the “get your act together and snap out of it” myth
• Understand the power of trauma-informed perspective can promote healing and resiliency
• Identify opportunities to support and advocate for youth who have experienced trauma
Introducing James

• James was 17 ½ years old when I first met him for his diagnostic assessment.
• He was placed about 100 miles away from his home, into a new group home.
• He was on probation for domestic violence against his adoptive mother and his younger brother, underage drinking, and theft.
• He likes to defy adults and takes great pride on angering them.
• He was diagnosed with Conduct Disorder and ADHD.
• He had a Wrap-Around Team working with his family
• He had an open child protection case.

What if this is all you know about James?
Symptoms/Story

No list of symptoms tells the story of someone’s life. For that story, you need to listen to the person…(Saakvitne, et. al., Risking Connection)

James’ Story: His past

• James suffered neglect, parental substance abuse and physical abuse ages 0-3.
• He was placed in foster care and went through 5 foster care placements from ages 3-6.
• His last foster parents adopted him at age of 8 ½ years.
• His adoptive father sexually abused him ages 7-11.
• His adoptive father physically and emotionally abused him ages 11-13. His adoptive father was imprisoned for the sexual and physical abuse.
James’ Journey

Child Welfare Trauma Training Toolkit: Module 1
Creating Trauma-Informed Child Welfare Practice: Introduction to the Essential Elements
Implementing the Essential Elements of Trauma-Informed Care* (*Modified by Buffington, 2014)

Essential Elements of Trauma-Informed Child Welfare Practice

1. Maximize the child’s sense of safety.
3. Help children make new meaning of their trauma history and current experiences.
4. Address the impact of trauma and subsequent changes in the child's behavior, development, and relationships.
5. Coordinate services with other agencies.
Essential Elements of Trauma-Informed Child Welfare Practice

6. Utilize comprehensive assessment of the child’s trauma experiences and their impact on the child’s development and behavior to guide services.

7. Support and promote positive and stable relationships in the life of the child.

8. Provide support and guidance to child’s family and caregivers.

9. Manage professional and personal stress.

1. Maximize the child’s sense of safety.

- Traumatic stress overwhelms a child’s sense of safety and can lead to a variety of survival strategies for coping.
- Safety implies both physical safety and psychological safety.
- A sense of safety is critical for functioning as well as physical and emotional growth.
- While inquiring about emotionally painful and difficult experiences and symptoms, workers must ensure that children are provided a psychologically safe setting.

- Trauma can elicit such intense fear, anger, shame, and helplessness that the child feels overwhelmed.
- Overwhelming emotion may delay the development of age-appropriate self-regulation.
- Emotions experienced prior to language development maybe be very real for the child but difficult to express or communicate verbally.
- Trauma may be “stored” in the body in the form of physical tension or health complaints.

Julian Ford, University of Connecticut

Concept of Alarm Mode

After repeated or severe trauma people may:

- Develop very sensitive alarm triggers
- They might not be able to shut off their alarm switch
- Alarm reactions are about automatic reactions, not thought out and using executive functions or reasoning
- Alarm reactions that save our lives in true emergencies can defeat us when we use them in ordinary /non-threatening situations
3. Help children make new meaning of their trauma history and current experiences.

- Trauma can lead to serious disruptions in a child’s sense of safety, personal responsibility, and identity.
- Distorted connections between thoughts, feelings, and behaviors can disrupt encoding and processing of memory.
- Difficulties in communicating about the event may undermine a child’s confidence and social support.
- Child welfare workers must help the child feel safe, so he or she can develop a coherent understanding of traumatic experiences.

4. Address the impact of trauma and subsequent changes in the child’s behavior, development, and relationships.

- Traumatic events affect many aspects of the child’s life and can lead to secondary problems (e.g., difficulties in school and relationships, or health-related problems).
- These “secondary adversities” may mask symptoms of the underlying traumatic stress and interfere with a child’s recovery from the initial trauma.
- Secondary adversities can also lead to changes in the family system and must be addressed prior to or along with trauma-focused interventions.
Biopsychosocial Implications for Child Development

- Altered Biological Stress Systems and Neural Circuitry/Structure
  - Elevated cortisol levels
  - Changes in physiological response to fear/threat
  - Restriction of brain growth
- Disruptions in Attachment Behavior
  - Caregiver-Infant bonding
  - Disorganized behavior, problems in emotion regulation, disrupted relationships, and more
- Changes in Social Development and Understanding of Social Stimuli
  - Encoding and interpreting social stimuli, and accessing more aggressive responses
  - Hostile Attribution Bias
  - Interpreting facial expressions

Trauma changes our biology, including brain development which can result in very well-developed emergency response systems in the brain at a cost to the executive functions of our brain that enhance learning and self-regulation...
5. Coordinate services with other agencies.

- Traumatized children and their families are often involved with multiple service systems. Child welfare workers are uniquely able to promote cross-system collaboration.

- Service providers should try to develop common protocols and frameworks for documenting trauma history, exchanging information, coordinating assessments, and planning and delivering care.

- Collaboration enables all helping professionals to view the child as a whole person, thus preventing potentially competing priorities.
6. Utilize comprehensive assessment of the child’s trauma experiences and its impact on the child’s development and behavior to guide services.

- Thorough assessment can identify a child’s reactions and how his or her behaviors are connected to the traumatic experience.
- Thorough assessment can also predict potential risk behaviors and identify interventions that will ultimately reduce risk.
- Child welfare workers can use assessment results to determine the need for referral to appropriate trauma-specific mental health care or further comprehensive trauma assessment.

**Child Welfare Trauma Referral Tool**

- Designed to help child welfare workers make more trauma-informed decisions about referral to trauma-specific and general mental health services
TIC Essential Element #7: Support and promote positive and stable relationships in the life of the child.

- Separation from an attachment figure, particularly under traumatic and uncertain circumstances, is highly stressful for children.
- Familiar and positive figures—teachers, neighbors, siblings, relatives—play an important role in supporting children who have been exposed to trauma.
- Minimizing disruptions in relationships and placements and establishing permanency are critical for helping children form and maintain positive attachments.

TIC Essential Element #8. Provide support and guidance to the child’s family and caregivers.

- Resource families have some of the most challenging roles in the child welfare system.
- Resource families must be nurtured and supported so they, in turn, can foster safety and well-being.
- Relatives serving as resource families may themselves be dealing with trauma related to the crisis that precipitated child welfare involvement and placement.
- Natural parents can experience significant trauma when separated from their children, this may also trigger re-experiencing past trauma.
TIC # 9. Manage professional and personal stress. (adapted Buffington, 2015)

- Child welfare, juvenile justice, mental health and other professions serving trauma-exposed youth and families can be high-risk professions, and workers may be confronted with danger, threats, or violence.

- Child welfare workers may empathize with victims; feelings of helplessness, anger, and fear are common.

- Child welfare workers who are parents, or who have histories of childhood trauma, might be at particular risk for experiencing such reactions.
Circle of Concern

Circle of Influence

Steven Covey: Seven Habits of Highly Effective People

Courtesy of the Child Trauma Assessment Clinic, Western Michigan University
Celebrate...
National Child Traumatic Stress Network Resources a SAMHSA funded initiative (www.nctsn.org)

- Free training curriculums through the NCTSN Educational Center
  - Think Trauma-Juvenile Justice Residential training curriculum
  - Child Welfare Trauma Training Toolkit, 1st or 2nd editions
  - Caring for Children Who Have Experienced Trauma-a Workshop for Resource Parents
  - Free online trainings on complex trauma and other topics

- Judicial Publications:
  - Ten Things Judges Should Know About Trauma
  - Judicial Benchcards

- Toolkits and information worksheets for parents, teachers, therapists, law enforcement, medical professionals, etc...

**Thank You!!!!**

- To James who taught me so much about survival, humor, resiliency, and collaboration...
- To the judge in Ohio who helped to give James and I this wonderful journey.
- To my colleagues who with patience tolerated my passion and stubbornness and who helped give James a fighting chance...
- James’ group home who made it their #1 priority to get James to therapy, and who went above and beyond for his future...
- To my son Joe who gave up part of his X-mas vacation and who treated James with such respect and dignity..
- To all of you in the audience, who are dedicated to serving youth and families and our community, you are truly life-savers!!!