Helping Children Heal

Building a Trauma-Informed Assessment
Learning Objectives

- Explore the intersection of presenting symptoms and traumatic experiences in early childhood.
- Develop an understanding of the need for trauma informed assessment and care.
- Learn 2 trauma informed assessment techniques that can be implemented in early childhood mental health programs.
What is Trauma?

- “...the unique individual experience, associated with an event or enduring conditions, in which the individual’s ability to integrate affective experience is overwhelmed or the individual experiences a threat to life or bodily integrity...” Pearlman & Saakvitne, 1995
- The essence of psychological trauma is the loss of faith that there is order and continuity in life.
- Trauma occurs when one loses the sense of having a safe place to retreat within or outside one’s self to deal with frightening emotions or experiences
  - Dr. Bessel van der Kolk, 1996
Prevalence

“Dealing with the effects of trauma is a healthcare priority; it is a serious as any major medical illness” (US Surgeon General)

- More than half of children 2-5 years old
- 78% experienced > one type of trauma
- Direct victimization or exposure to violence within the home has greatest frequency
Why is complex trauma in childhood so damaging?

The Trauma Tree

- adult
- teenager
- childhood
- infancy/toddler
- birth
- prenatal

www.STEAMPoweredFamily.com
Impact of Trauma on the Developing Brain

- “Because the brain is most plastic (receptive to environmental input) in early childhood, the child is most vulnerable to variance of experience during this time.”
- Changes not only the structure but stress response networks and neural pathways.
- “Experience may *alter* the behavior of an adult, experience *literally provides the organizing framework* for an infant and child.”
  - *Perry, B.*, 2009
Impact of Trauma on the Developing Brain

The Triune Brain Model

- **Upstairs**
  - Neocortex
  - Speech
  - Logic
  - Higher thinking skills

- **Downstairs**
  - Limbic System
  - Emotions

- **Basement**
  - Reptilian Brain
  - Instinctual drives

The Brain House
Relationship between early childhood trauma and health and well-being problems later in life.

Source: World Health Organization
Common Symptoms

- What do changes to this brain architecture look like?
  - Easily irritated & frustrated
  - Difficulty focusing
  - Struggles with impulse control, judgment & decision making
  - Poor memory
  - Hypervigilant
  - Anxious and fearful
  - Aggressive
  - Withdrawn
  - Rapid changes in emotions
Now you know….now what?
Trauma-Informed Assessment

- Content
- Foundation for Successful Treatment
- Process
- Reflective Supervision
- Groundwork
First Things First

- Setting the stage from the 1st phone call
  - What have you told Johnny about my coming?
- Materials - What kind of toys to bring and when?
- Stumbling upon trauma at the 1st appt
How to talk about tough stuff with little ears around

Being Ignored
Worst feeling ever.
4 Key Components

- Child Behavior Checklist
- ACEs
- Parent-child interaction
- Psychosocial interview
ACEs

- **Adverse Childhood Experience (ACE) Questionnaire**

- **Childhood Trust Events Survey**
  - Caregiver Form
  - Child and Adolescent Form (8 years and older)
    - [http://www.biomedcentral.com/content/supplementary/1471-2431-13-208-s1.pdf](http://www.biomedcentral.com/content/supplementary/1471-2431-13-208-s1.pdf)
Marshack Interaction Method

- Assessment tool from the Theraplay model
  - Created by Jernberg & Booth
  - Supports the development of building blocks for attunement in the parent-child relationship
- Structured technique for observing and assessing the overall quality and nature of relationships between the caregiver and child
Marshack Interaction Method (MIM)

- Designed, planned activities under 4 domains
  1. Structure
  2. Engagement
  3. Nurture
  4. Challenge
<table>
<thead>
<tr>
<th>Nurturance</th>
<th>Engagement</th>
<th>Structure</th>
<th>Challenge</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Feeding*</td>
<td>• Burrito/Taco*</td>
<td>• Cotton Ball Hockey</td>
<td>• Balancing</td>
</tr>
<tr>
<td>• Sing-Swing</td>
<td>• Popcorn toes</td>
<td>• Bean Bag Hockey</td>
<td>• Balloon tennis</td>
</tr>
<tr>
<td>• Face Paint</td>
<td>• Check ups</td>
<td>• Eye signals</td>
<td>• Tunnels</td>
</tr>
<tr>
<td>• Lotion and powder print</td>
<td>• Push me over/Pull me up</td>
<td>• Toilet Paper Bust-out</td>
<td>• Newspaper punch or toss</td>
</tr>
<tr>
<td>• Slippery slip/train</td>
<td>• Cotton Hide</td>
<td>• PB &amp; J</td>
<td>• Pickup toe-game</td>
</tr>
<tr>
<td>• Weather report</td>
<td>• Beep &amp; Honk</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Psychosocial Interview

- **Working Model of the Child**
  - Developed by Dr. Charles Zeanah and Dr. Diane Benoit
  - Structured interview to access parent’s internal representations or working models of their relationship to a particular child.
  - Purpose - to have individuals reveal as much as possible in a narrative account of their perceptions, feelings, motives, and interpretations of a particular child and their relationship to that child.
  - Explores development, hopes, fears, intergenerational patterns, relational characteristics and regulation
Psychosocial Interview

Child functioning:
- Emotional-behavioral functioning
- Developmental status
- Prior trauma history
- Target trauma(s)
- Pre and/or post trauma functioning
- Coping skill, strengths, adaptive functioning
- Cultural contexts
- Temperament
- Quality of peer relationships
Psychosocial Interview

Target Questions for Trauma(s) – Child

• What did the child see, hear, experience
• What moments were most difficult
• What has the child been told or overheard about the event
• What do the caregivers want the child to know?
• Child’s initial response
• What emotional/behavioral changes have caregivers observed
• Can caregiver identify any trauma reminders for the child?
  • What has the caregiver noticed?
  • How does the child respond?
Psychosocial Interview

Caregiver functioning

- Trauma-related symptoms
- Pre-trauma functioning and mental health/substance use
- Trauma history
- Coping strategies and style
- Family relationships and history
- Cultural contexts
- Ghosts and angels in the nursery
Psychosocial Interview

- Social supports for family
  - Extended family
  - Relationship network
  - Faith community
  - Employment

- Community
  - Community violence

- Culture, language and immigration factors
Preparing for Treatment

- Cultural Beliefs About Talking About Trauma
- Play
- Permission to Introduce Trauma-Related Toys or Props
- Child’s Need for Emotion Regulation while Processing Trauma
- Need for Regular Sessions
- Caregiver’s Perspective of Treatment
- Not just what you get, but how you get it
- Observing (Balance listening for content with observing how the parent copes with telling you the story)
- Provide psycho-education about the trauma response
- Normalize the post-traumatic symptoms that parent and child may be experiencing
Video Example
What is the role of reflective supervision post-assessment?
WOUNDS FROM THE PAST

The wounds from the past last
Think caste, slaves, mass graves
We hurt each other in so many ways

Too many to count
How many generations to surmount
The trail of tears

Broken bones
Broken homes
Wounded souls
Different goals

Thrive?
Survive?
Stay alive.

Who carries the blame?
Who wears the shame?
Who feels the pain?

For those of us who seek to heal
Wounds caused by a past that
Society would bury and conceal.

Saying it was long ago
Forget all that your souls and bodies know

A question inside us does arise
How does healing happen in the face of lies?

~ Ghazal Ippen, 2016
A Practical Guide to Reflective Supervision
  By Sherryl Scott Heller and Linda Gilkerson – Zero to Three (2009)

Don’t Hit My Mommy
  By Alicia F. Lieberman and Patricia Van Horn (2005)

Psychotherapy with infants and young children: repairing the effects of stress and trauma on early attachment
  By Alicia F. Lieberman, Patricia Van Horn - Guilford Press (2008)

Reflective Supervision: Connecting classroom and practice.
  The University of Kansas School of Social Welfare (2010)

Theraplay: Helping Parents and Children Build Better Relationships Through Attachment-Based Play
Dr. Michelle Acker and Carmen Rosa Norona, LSW – Child-Parent Psychotherapy consultation provided from August, 2012 to July, 2014


Clinical Work with Traumatized Young Children
By Joy D. Osofsky – Guilford Press (2011)
Chapter 16 by Betsy McAlister Groves and Marilyn Augustyn