

Working with traumatised children

Safety

Traumatised children have had experiences that have overwhelmed their sense of safety. Carers and teachers have to ensure that these children not only are safe but feel safe. This requires a continuous awareness of the emotional state of the child and a recognition that terror is often just below the surface. Many children will have had little or no help in learning to develop mechanisms for soothing themselves. Creating a relaxed and calming atmosphere will help children to begin to feel safe although they may need proactive help both at home and at school to recognise consciously the physiological experience of relaxation. The process of regulating stress and anxiety is learned through interaction with a person who is significant and can provide soothing experiences. Some looked after children may begin to learn this with carers but find it difficult to transfer into the educational setting when their carer is absent. Creative ways of helping children hold in mind the soothing concern of carers may have to be found. Children may for example find it helpful to take something of the carer with them to school particularly if it has a smell that can evoke the image of the carer.

Ultimately the most important source of safety and the best route to recovery for traumatised children will be the relationships they have with those people who make them feel safe. Adults caring for or teaching children who have been traumatised need to use themselves in ways which will be likely to enhance a feeling of safety. They also need to be observant of children and learn what is most helpful for each individual child. Kate Cairns, a social worker, trainer and author, who has fostered many children, insists that adults who come into contact with traumatised children are either part of the solution or part of the problem. Every adult interaction with children who have experienced trauma either confirms the world as a dangerous place or can be part of the process that challenges these fundamental assumptions and helps the child to recover

Triggers

Traumatised children often react to sensory triggers without conscious thought. If this reaction is misunderstood adults may accuse children of “mindless violence” or describe young people as behaving in a rude or abusive way with no provocation. Although the experiences that children have undergone are very individual and thus many of their triggers are personal, it is possible to undertake a sensory audit of the care and learning environments that may help to identify more general trigger points such as unpleasant smells, sudden loud noises, flickering light or movement in the visual field and extremes of tactile experience particularly temperature. Regulating distance between people is also important as traumatised children may find normal physical closeness threatening particularly if this is in a face to face context. It is equally important that time and effort are taken to ensure that environments are structured to ensure that they are calming and relaxing.

In exactly the way that children can be triggered into panic by sensory experiences associated with danger or trauma they can learn to associate positive experiences with particular sensory inputs. This can include comforting food, relaxing aromas, soothing tactile experiences, gentle sounds and calming colours and shapes. These sensory experiences can then help children to relax and cope with their daily experiences more competently.

Managing hyperarousal

Traumatized children may appear to create havoc around themselves as hyperarousal can be catching and within a group of children such as a classroom or a residential unit this can obviously cause problems. Adults themselves are not immune to this response so it is important for teachers and carers to remain in control of the emotional tone and in particular to be aware of their own level of arousal. It can also be helpful to intervene with other children in the group who have the capacity to regulate their arousal as this can help moderate the experience for the traumatized child. For children who have become used to a high level of arousal it can initially be difficult to let this go as they are to some extent addicted to the high level of stress chemicals in their bodies. They like high stimulus activities and can be uncomfortable in dealing with calmer environments. Helping them to stick with this while recognising their discomfort is part of the process of recovery.

It is always important to work directly with children to discover where they feel most safe and enable them to use such safe spaces when they recognise they are becoming severely anxious or stressed. In schools it can be helpful to have a recognised procedure that allows children the opportunity to use such space rather than requiring them to remain in the classroom and respond negatively.

Dissociation

Not all children who are traumatized present as hyperaroused. Others have responded to their pain and stress by cutting off from it- they literally no longer feel it. This can be a very important and useful way of managing the immediate impact of the experience but it can result in children cutting off from their experience in general. They may for example be unaware of extreme temperature variation or pain. For these children there needs to be a degree of appropriate and manageable stimulation which consciously reconnects them to their sensory lives. Carers and teachers may have to use words to make these experiences conscious and connect them permanently into memory. It can also be helpful to make children aware of the positive effect of dissociation in protecting them from the overwhelming stress of their experiences. They can then begin to understand that dissociation is a tool we all use but in a constructive temporary way that allows us to switch off briefly but does not cut us off from our fundamental self.

Auditory selection and processing difficulties

Trauma has been described as “wordless terror” and children, who have been traumatised, particularly if this involves very early neglect or maltreatment, may be unable to process language normally. Children may not hear what an adult actually says to them and it is important to check out with them what they have heard. This may have to be done more than once. A common processing problem is for children to hear only the last part of a sentence. This can lead to very difficult situations if an adult begins an interaction with a child by using the word “don’t”. If the child only hears the last part of what is said they are likely to do exactly the opposite of what has been asked and find themselves inexplicably in serious trouble for deliberate defiance.

Trusting and feeling

Many looked after children have never learned to trust other people. Those who may have had good enough early experiences have often had their trust in people and the world shattered by traumatic events. Learning to trust is a very real risk for such children and cannot be forced. Most adults who work with children believe themselves to be trustworthy and indeed behave in a trustworthy way. It can be difficult and painful to be regarded with hostile mistrust by a young child whom you wish to help. Despite this it is important when dealing with traumatised children to expect to receive an untrusting reaction and be responsive and delighted when a child shows any evidence of trust.

Understanding emotions

One of the problems for traumatised children is that they struggle with understanding their own and others’ emotional experiences. Adults around them need to be able to own their own emotional responses honestly so that children can begin to be aware of how feelings work. They will also learn that the safe expression of difficult feelings can help to contain them and that there is an alternative to physical aggression when experiencing distress. Adults also have to be alert to the subtle expression of more positive emotions in children and help them to become consciously aware of them. The experience of compassion or joy contribute to a sense of human connectedness which is often missing for traumatised children.

Learning about trauma

It has been increasingly recognised that people who have experienced trauma can benefit greatly from learning about the effects of trauma. This is true for children as well as adults. Children experience relief in knowing that their apparent unpredictability is a recognised response to unbearable experiences. They can learn that there are patterns to their behaviour and that it is possible to understand these and begin to recover and gain some control.

This type of education is valuable for all children as it increases the resilience of children who are currently untraumatised and also helps them to understand the responses and behaviours of their peers who have suffered trauma.

Children also need to learn about their own responses so that they can begin to exercise control over them. Most school age children are able to be accountable at some level for their behaviour. Asking a traumatised child why they have reacted violently to a trigger, however, is unhelpful as they will genuinely not know the answer. If they are honest and say they do not know they may feel stupid and exposed, potentially triggering a further reaction. Alternatively adults may view this as deliberate withholding and become angry with the child. If the child chooses to attempt some kind of explanation they may well give a plausible story that will placate an adult but may actually act as a barrier to receiving the help and understanding they need. It is more helpful to ask the child what they felt in their body just before they reacted. Over time children can learn to recognise their own physiological responses to stress and with help learn strategies for managing them.

Managing shame

Securely attached children, who have had reasonably benign early experiences, learn as toddlers how to cope with making mistakes. Once children are mobile, their carers have to use their relationship with them to ensure that they learn to be safe. This involves children being exposed to brief moments of parental disapproval when they breach boundaries. This causes distress to the child which is manageable because attuned carers quickly restore the positive relationship. This process ultimately allows children to internalise rules of behaviour and also allows them to learn that making mistakes is not catastrophic and relationships can survive these transient upsets. For maltreated children there are no such certainties and the normal, developmentally essential, experience of shame becomes toxic. Rather than admitting to a mistake or bad behaviour, the child may deny responsibility or even refuse to admit anything has happened. Faced with the reality of their own behaviour by adults or their peers, children can become overwhelmed by shame and this can trigger extreme aggression or fear. This sensitivity to shame can make normal school experiences very painful for children – classroom learning involves making mistakes, every school day faces children with a series of choices any one of which they may get wrong. Carers and teachers should ensure that these children are carefully prepared for situations which require them to exercise unfamiliar choices and also avoid any intense and public exposure to shame inducing experiences. Children obviously have to experience appropriate limit setting but it is important that the consequences of any behaviour does not include the serious disruption of important relationships.

Trauma organised identity

Traumatized children do not share the fundamental assumptions of emotionally healthy people as described by Janoff-Bulman (1992):

- The world is benevolent
- The world is meaningful
- They are worthy people

Their identity is structured by a belief that the world is a chaotic, hostile place and that they themselves are worthless. Obviously such an internal perspective leaves children deeply unhappy and profoundly mistrusting with little hope for a positive future. Despite the distress that such beliefs cause them, these children are deeply resistant to changing their core constructs even when presented with evidence that fundamentally challenges them. Love, warmth, concern are reinterpreted through the lens of trauma as attempts to damage or control. Direct challenge to such entrenched beliefs is rarely effective and indeed may provoke stronger resistance. It can be more helpful to pose questions and offer choices rather than direct challenges to these assumptions. Crucially carers and teachers have to demonstrate through their consistent positive regard for a child that it is possible over time to let go of their trauma organised identity and replace it with a more positive sense of self.

Letting go of blame

Many children who have experienced maltreatment or witnessed violence on others have a distorted sense of their own responsibility for the events that have damaged them. If they themselves were harmed, then they must have been evil and deserved it and, if they were unable to prevent harm to others, they are responsible for that failure no matter how small or weak they may have been. Many of these children have indeed made heroic attempts to care for and protect their parents or siblings but, as a result of their developmental stage, these efforts are ultimately doomed to failure. This sense of badness, responsibility and failure is a massive burden for children to carry and over time they must be enabled to let go of these. This connects directly with the ideas discussed above about the traumatic identity of many children.

Developing social experiences

Being part of a group, whether this is in a living situation, at school or in leisure situations, can be extremely anxiety provoking for traumatized children. Groups are highly stimulating experiences which can quickly overwhelm the fragile coping mechanisms of traumatized children. In particular these children have a tendency to perceive as negative or hostile, social cues which other people experience as neutral or positive. This misinterpretation of the intentions or feelings of others can lead to children being ignored or excluded by their peers. At times children may misread

situations so badly that they feel totally threatened and respond very aggressively to little or no provocation. When children are beginning to feel safe in some of their relationships and have some capacity to control their reactions to stress or shame, it can be useful to begin to help them to rehearse social situations and learn new problem solving techniques. This will not be an easy process and children will need support and praise for even very small achievements. It is important to expect difficulties and failure initially but ensure that children are not discouraged. They need to be able to return to places and people that make them feel safe and can help them regulate their stress. Linking children with more socially competent peers who have some understanding of the difficulties facing the child can be helpful particularly in inherently stressful settings such as school.

Managing feedback and reflection

For children who are hypersensitive to shame coping with any feedback about their behaviour can be unbearable. Even praise can initially be heard as criticism and provoke a difficult reaction. Without feedback children cannot learn. It is helpful to make children aware that most people are able to accept feedback without catastrophe. Adults need to model the normality and acceptability of receiving feedback, even if it is the hostile feedback of a traumatised child telling them how useless they are! Children need to be helped to understand that the problem that should be focused upon is not the feedback but the overwhelming emotional response that is triggered in them. If they are able to use their developing skills in self soothing and self management they will find it easier to tolerate the feedback and use it. As children become more used to receiving feedback make sure that carers and teachers find multiple opportunities for providing positive feedback- catch them being good! Alongside work on managing to accept feedback it is helpful to work with children on developing their reflective skills. If they are able to think about what is happening and recognise patterns in their responses they will have much greater capacity to exercise the kind of control that will enable them to manage their everyday lives. Some children who have experienced trauma can be helped to develop reflective skills far in advance of those of their peers.

Joy, hope and the future

Children who have suffered very early maltreatment may not have experienced pleasure or joy as emotions. Similarly older children who suffer some kind of trauma often lose the capacity for joy or hope. For young people who are in a supportive environment this can be quite a temporary phase but for others who do not have the same kind of helpful network this can become an entrenched problem. Professionals and carers can sometimes confuse the manic excitement, which some young people use to avoid their own distress, for children having fun. Even when young people are beginning to recover and do start to have moments of being genuinely happy they can find it hard to hold on to the memory of them. Adults around these children have to be

alert for these positive moments and draw them to the consciousness of the young people with whom they work. One of the effects of trauma is that people become focused on immediate survival and having a longer perspective is very difficult to achieve. Young people need adults to help them have a meaningful narrative of their past and an aspirational but realistic plan for their future. For most young people educational achievement is a crucial pathway to positive adult outcomes. Working towards such achievement can only have true meaning for young people when they can believe in a secure future that stretches beyond the next day. Working with children who have been hurt in this way and dealing with the impact of their distressed behaviour can challenge the hopefulness of adults. If, however, adults around them give up hope then these children are lost forever.

S.E.L.F.

The Sanctuary Model of care is a way of working with traumatised people developed in the US. The model is a sophisticated, well developed method that has been extensively researched but they use a simple acronym – S.E.L.F. -that serves as a very easy reminder for everyone, including children and young people, of the fundamental components of recovery.

- Safety
- Emotional education
- Loss
- Future

The paramount importance of creating a sense of safety is emphasised as it is impossible to work on any of the other components of recovery if children or those around them feel unsafe. They strongly urge practitioners to develop a “safety plan” with children as the initial piece of intervention. More information on this model can be found at <http://www.sanctuaryweb.com/> .

This handout is broadly structured on the ideas of the nine point curriculum for working effectively with traumatised children and young people, developed by Kate Cairns and Chris Stanway. In “Learn the Child” 2004.