
Becoming a Trauma-Informed Parent

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Think About This...

- Childhood trauma occurs more than you think...
- More than 25% of children experience a traumatic event by the age of 16.
- Sadly, many children suffer multiple and repeated traumatic events.
- Generational trauma, meaning a family history of trauma can also increase a child's risk of trauma.
- **It is important to understand that the signs of childhood trauma vary from child to child and even from family member to family member.**
- **TRAUMA IS SUBJECTIVE**

Good Stress vs. Bad Stress

Good Stress = Builds Resiliency

- Waiting to open presents on birthdays or christmas.
- Having to choose between two favorite activities.
- A child riding her bike down the street and sees a pothole up ahead. She goes into survival mode and has to make a quick decision of what to do.

Bad Stress = Toxic Stress

- "Will I be able to eat dinner tonight?"
- Questioning where they will sleep tonight.
- Will mom hug me when I show her the picture I drew of our family?

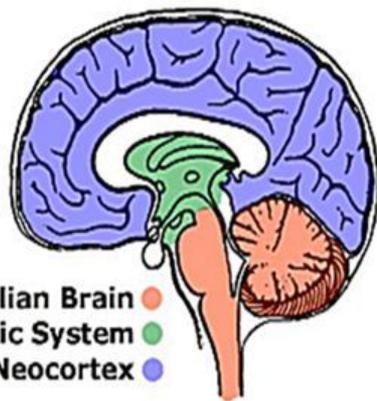
Some Types of Trauma

- Emotional Abuse
 - Physical Abuse
 - Sexual Abuse
 - Emotional neglect
 - Domestic Violence
 - Household substance abuse
 - Household Mental Illness
 - Parental separation or divorce
 - Incarcerated family member
 - Death of a loved one
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Understanding Childhood Trauma

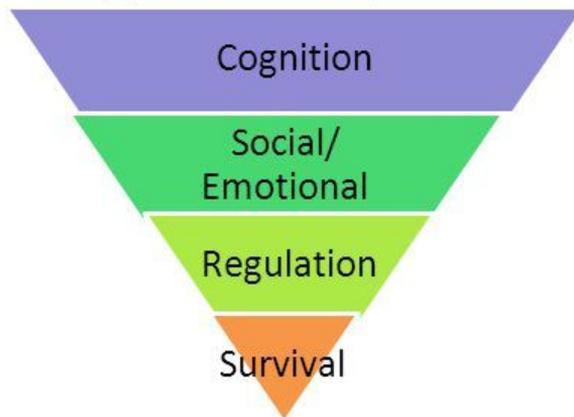
- Trauma can be defined as a deeply depressing or disturbing experience.
- Trauma can be recognized by its feelings of horror and helplessness it elicits from its' victims.
- Trauma has no age limits and may seemingly tend to favor children due to their lack of resiliency.
- Traumatic experiences have been found to alter the structure of the brain which, for the child, places more emphasis on survival.

Trauma & Brain Development

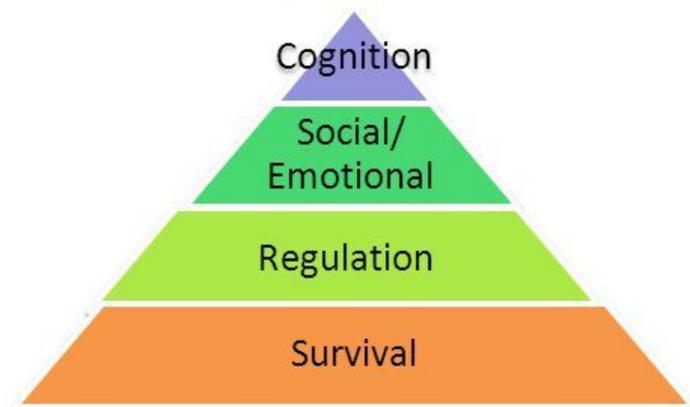


Reptilian Brain ●
Limbic System ●
Neocortex ●

Typical Development



Developmental Trauma



Recognizing the Signs/Symptoms of Childhood Trauma

Preschool Children:

- **Anger accompanied by physical aggression**
- Fear separation from parents/caregivers
- Unable to regulate themselves
- Poor eating habits/hygiene
- Difficulty falling asleep/staying asleep
- Struggle to put their feelings into words
- Feelings of sadness

Elementary Children:

- **Anger accompanied by physical aggression**
- Become anxious/fearful
- Express guilt/shame
- Difficulty concentrating
- Trouble falling asleep or staying asleep
- Difficulty expressing their feelings
- Feelings of Sadness

Trauma Informed Interventions

- Understand that trauma is fluid and does not always appear directly after a tragic event. For example: grief
- Allow your child an OPEN space to share his/her feelings.
- What happened? vs. What's wrong with you?
- Therapy
 - Music, Art, Equine/Animal Assisted therapy
- Trauma can be generational, therefore it is important to look at ourselves and understand how we are trained to react to situations.
- Learn to be “okay” with silence
- Practice your patience

School Social Work

- School Social Workers (SSWs) are the bridge between the school, home, and community to help children with emotional, developmental, and behavioral needs.
- The goal of a SSW is to help students and their families return to stabilization after experiencing trauma.
- SSWs work directly with school administration as well as students and families, providing mental health interventions, crisis management, and other support services (i.e., resources, referrals to other mental health agencies, donated goods, etc.).

What is the Role of a School Social Worker?

- SSWs are trained mental health professionals who can assist with mental health concerns by completing assessments for emotional functioning.
- SSWs can help students overcome academic barriers, such as low attendance, by completing home visits, working directly with families, and providing resources to help families overcome any barriers.
- SSWs can provide crisis management and assess for safety.
- SSWs advocate for students and families to help make sure their needs are being met.
- SSWs can also provide individual and group therapy to help students express their needs and learn ways to cope.

SSWs use Evidence-Based Practices to Help:

- Students who express current or past trauma
 - *(e.g., sexual abuse, physical/domestic violence, neglect, homelessness, etc.)*
- Students who have difficulty attending school regularly
- Students manifesting externalizing behaviors
 - *(e.g., aggression, disruption, anger/hostility, homicidal ideation/threats, etc.)*
- Students manifesting internalizing behaviors
 - *(e.g., anxiety, depression, social withdrawal, suicidal ideation/threats, etc.)*
- Students who are struggling academically

Family Resource Center

- The purpose of the resource center is to become a protective factor which will reduce barriers that inhibit students and their families from being successful at school and in their everyday lives.
- The resource center is designed to help students and their families access clothing, toiletries, food, school supplies, and community resources.
- To better serve the needs of our students and families, we are ALWAYS gathering donations for our school resource center.



Sources

American Academy of Pediatrics (2014). Adverse Childhood Experiences and the Lifelong consequences of Trauma. Doi: https://www.aap.org/en-us/Documents/ttb_aces_consequences.pdf
<http://hdl.handle.net/11212/2211>

Walkley M, Cox, T.L. (2013). Building Trauma-Informed Schools and Communities. Children & Schools, Volume 35, Issue 2, Pages 123–126. Doi: <https://doi.org/10.1093/cs/cdt007>

Wong, M. Basic Facts about Childhood Trauma. National Child Traumatic Stress Network. LAUSD Trauma Services Adaptation Center for Schools. Doi: <https://www.melissainstitute.org/documents/ChildTraumaBasicFacts.pdf>

https://www.samhsa.gov/sites/default/files/programs_campaigns/nctsi/nctsi-infographic-full.pdf