

Fostering Resilience in Children Traumatized by Domestic Violence in Collaboration with their Non-offending Parent



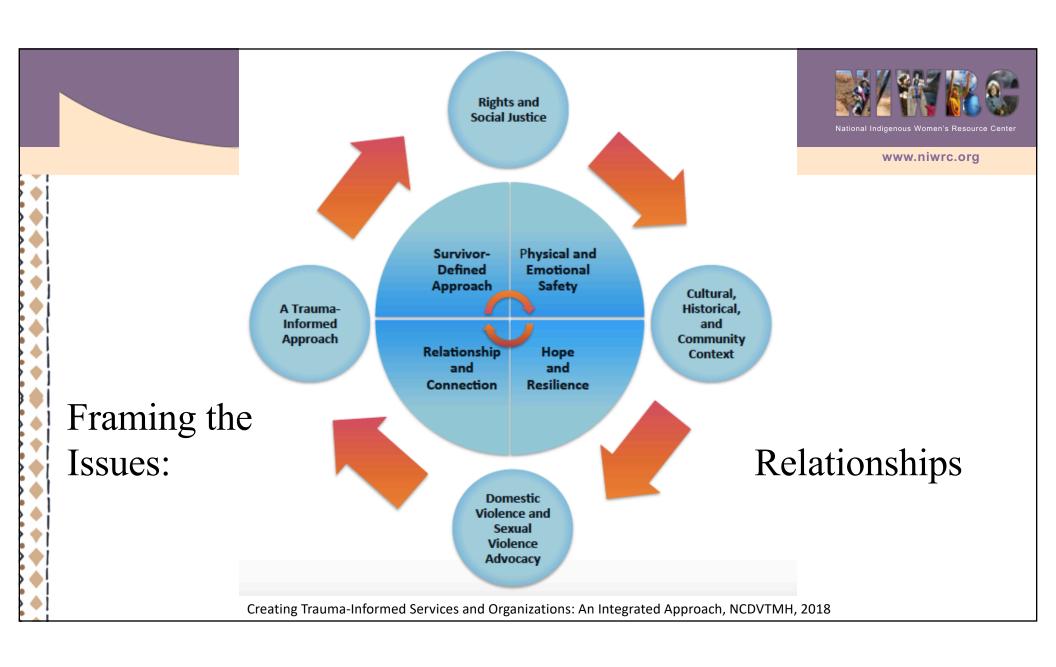


This presentation was made possible by Grant Number 90EV0452-01-00 from the Administration of Children, Youth and Families, Family and Youth Services Bureau, U.S. Department of Health and Human Services. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the U.S. Department of Health and Human Services.



Overview of Contents

- Context for Working with Children & Non-offending Parent
- Understanding Trauma & Resilience
- Neurobiology & Impact of Trauma
- Focus: Impact on Children
- Preparation for Working in Collaboration with Children & Parent
- Trauma-informed Methods
- Healing & Cultural Approaches



Trauma: More than Stress; It's Violence



www.niwrc.org

What Do We Mean by "Trauma"?

INDIVIDUAL TRAUMA: Trauma is the unique individual experience of an event or enduring condition, in which:

- The parent and child experiences a threat to their life or to their psychic or bodily integrity (or to a loved one. Example: children and others who witness violence).
- The parent's and child's coping capacity and/or ability to integrate their emotional experience is overwhelmed.
- This includes you/we/they

Giller 1999, NCDVTMH 2012, Packard//NIWRC 2012



COLLECTIVE AND HISTORICAL/INTERGENERATIONAL TRAUMA

Cumulative emotional, psychological and spiritual wounding <u>over the lifespan</u> and <u>across generations</u> emanating from massive <u>group trauma</u> experiences

Giller 1999, NCDVTMH 2012, Packard//NIWRC 2012

RESULTS OF TRAUMA TODAY



www.niwrc.org

Historical and intergenerational trauma has a direct effect on our roles and relationships as Relatives and ability to parent.

- How do we learn to be parents?
- How does intergenerational trauma, especially boarding school experiences, impact our expectations for our children and ourselves as parents?

Hope & Resilience



www.niwrc.org

We carry intergenerational resilience in our DNA!

Resilience is the ability to create positive outcomes in spite of serious threat or adversity.

The importance of a consistently loving, responsive relationship with a parent or other adult invested in the child's well-being over time is key to resilience. (Werner & Smith, Masten)

Other factors that support resilience:

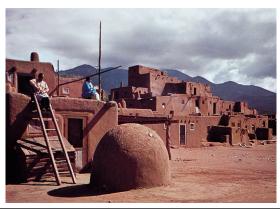
- Child's innate resources
- Sense of self-agency
- Beliefs, values, and family practices
- Supports for the child and family

NCDVTMH



Indigenous culture is the basis for hope & healing.

Before colonization, domestic violence, violence against women and children and LGBTQ2S people were extremely rare







Physical Neurological Impact of Trauma



www.niwrc.org

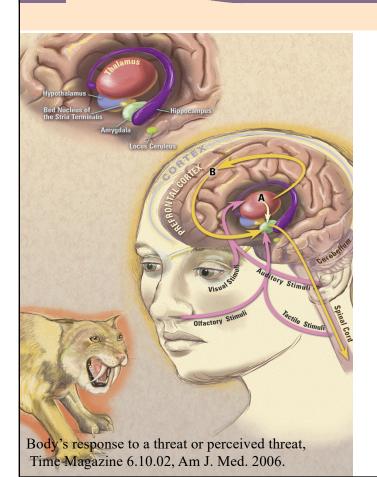
"Until we understand that traumatic symptoms are physiological as well as psychological, we will be woefully inadequate in our attempts to help them heal."

- Peter Levine, Author of Waking the Tiger, and Healing Trauma

Resources:

- Understanding the Neurobiology of Trauma: Implications for Working Effectively with Adults and Adolescents by Janine D'Anniballe, Ph.D.
- Webinar: "Understanding Trauma & the Body: From Theory To Practice" www.nationalcentertraumadvmh.org





TRAUMA CAN CHANGE BRAIN FUNCTION

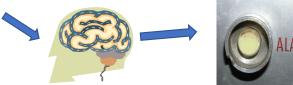
The brain can heal in different ways.
All require safety, no additional stress, calm environments, limited activity and change.
And time.

In a Nutshell: We are Wired for Survival...



www.niwrc.org

Information from our senses and Internal state



We may be aware or unaware.

Our responses may be visible or invisible.



<u>FLIGHT, FIGHT OR FREEZE</u>

Moss 2013, Cave, Johnan and Curley 2015, Inspired Vision, LLC



Other Unseen Injuries

- Sleep deprivation
 - Effects memory, mood & focus; can cause hallucinations
- Concussion syndrome/Traumatic Brain Injury
 - Can effect all functioning, senses, etc.
- Exhaustion
 - Can be exhausted mentally, emotionally, physically, spiritually/faith
- Nutritional Deficiencies

Co-occurring issues: PTSD, TBI and other physical injuries, poverty, mental health issues, disabilities, addictions etc.

B. Hill



How do these neurobiological changes effect us, parents and children?



Children's experiences of domestic violence are individual, widely varied, and unique.

Some children do well and may not need additional supports... children living in homes where they have experienced domestic violence from an early age... are at greater risk for developing trauma-related responses that may impact their growth and development.

National Center on Domestic Violence, Trauma & Mental Health



The trauma is not "past" for many people – including children and parents.

For many, the Alarm is often constantly "on"

- Our bodies and brains are on constant alert for danger
- Reassurance that we are safe may not help turn off the alarm

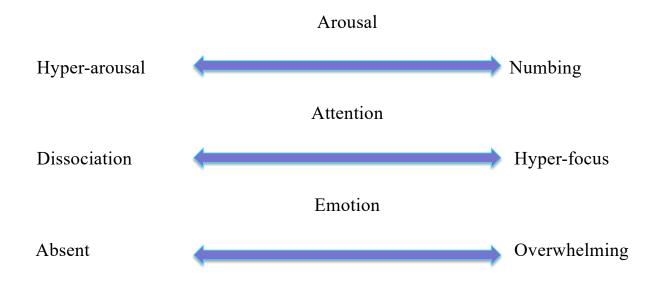
NCDVTMH 2014





N. Miller

People Respond to Trauma Differently at Different Times



What Trauma May Look Like in Parents and Children



www.niwrc.org

- Being overwhelmed by or having strong reactions to seemingly "minor" irritants
- Hyper-alert: Scanning for danger, worry that something bad will happen
- Numbing, checking out
- Not being able to "get over" things that happen in day-to-day life
- Disengaging and avoiding interactions
- Minimizing or compartmentalizing
- Problems communicating; can not tell their "story"
- Being overwhelmed / under-reacting
- Negativity; "crabbiness"

National Center on Domestic Violence, Trauma & Mental Health

Trauma Reactions can Include:



www.niwrc.org

- Anxiety, depression
- •Inability to focus or concentrate
- •Difficulty remembering
- •Flashbacks
- Dissociation
- •Difficulty sitting still or relaxing

- Anger/over-reactions
- •Sleeping a lot/ not enough
- Difficulty making decisions
- Substance use

What would this look like for children?
Impact on responses? Labels?

NCDVTMH: Thinking About Trauma in the Context of Domestic Violence Advocacy: An Integrated Approach Module, August 2014

Ongoing Impact



www.niwrc.org

Trauma can affect us, parent's and children's capacity to:

- Feel connected to caring others
- Experience self as deserving and worthwhile
- Manage and share feelings
- Stay present and connected; maintain self-awareness
- Comfort ourselves; be comforted by others
- Ability to remember; memories can be "snapshots" and/or disorganized
- Ability to feel relaxed, joy, happiness



Trauma Reminders (aka "triggers"):

Reacting in the present to traumas from the past

For example:

- A particular smell or tone of voice can bring about the need to defend.
- Dark lighting
- Being touched in certain ways
- Closed spaces

NCDVTMH



If not informed about the neurobiology of trauma, adults and children experiencing trauma reactions may feel like they are going crazy.

If you get punched, you expect bruises.

If you get an emotional/mental punch, the bruises are neurobiological, mental, emotional and spiritual –

it's a natural response to the chaos of violence.

Focus: Impact on Children



www.niwrc.org

AI/AN children (aged 14 - 16 years old), higher rates:

- ➤ Substance use disorders most common
- ➤ Disruptive behavior disorders
- >Anxiety disorders
- > Mood disorders
- ➤ Conduct and oppositional defiant disorders
- >Attention deficit-hyperactivity disorder

Source: Ann N Y Acad Sci. 2008; 1136 126-136; Poverty and Health Disparities for American Indian and Alaska Native Children: Current Knowledge and Future Prospects; Michelle Sarche and Paul Spicer, University of Colorado, Denver, American Indian and Alaska Native Programs

Be leery of labels and aware of stigma & stereotypes



All Ages

Don't forget the child/youth who may not exhibit acting out behaviors. It doesn't necessarily mean the child/youth isn't in emotional distress.

They may have symptoms of avoidance and depression that can be just as serious as those of the acting out child/youth.

National Child Traumatic Stress Network, Child Trauma Toolkit for Educators, Oct. 2008, www.NCTSN.org

INFANTS, TODDLERS, & PRESCHOOLERS



www.niwrc.org

What you may observe:

- ♦ Sleep disturbances
- ♦ Disturbances in feeding
- ♦ Feelings of helplessness and passivity
- ♦ Generalized fearfulness
- ◆ Specific new fears
- ♦ Regressed developmental skills or delayed development (ex. toilet training, baby talk)
- ♦ Clinginess and separation anxiety

- ♦ Inhibited play and exploration
- ♦ Thinking/talking about traumatic event
- ♦ Being upset at reminders and doing their best to avoid reminders
- ♦ Irritability
- ♦ Aggressiveness
- Scanning for danger
- ♦ Easily startled
- **♦** Tantrums

Adolescents



www.niwrc.org

What you may observe:

Detachment, shame, and guilt Self-consciousness about their fears and intense feelings

"Acting out" and sensation-seeking behaviors that may include lifethreatening reenactments

Abrupt shifts in relationships

Desire for and plans to take revenge

Radical changes in attitude and changes in self-identity

Premature entrance into adulthood or reluctance to leave home

Being upset at reminders of the trauma and doing their best to avoid reminders

Coping behaviors that may include self-endangering behaviors such as substance abuse and/or cutting and eating disorders

Poor school attendance/ dropping out of school

Refusal to take direction; "oppositional defiant disorder"

Inability to take responsibility for their actions

Trauma-informed Preparation for Working in Collaboration with Children & Parent



www.niwrc.org

"Being Trauma-informed is more than being nice. To be nice is to be human."

Russel Strand, "Forensic Experiential Trauma Interviews: Trauma-informed Interviews, Investigations & Prosecutions" webinar at www.evawintl.org



How Does a Trauma-Informed Approach Help?

- Normalizes human responses to trauma
- Supports healing; minimizes revictimization
- Shifts our understanding of symptoms from "What's wrong with you?" TO "What happened to you?"
- Recognizes symptoms as survival strategies
- Recognizes the importance of understanding the meaning people make of their experiences
- Actively honors survivor-centered approaches, voices and expertise

NCDVTMH

Ways that Help Heal



www.niwrc.org

- Breathing!
- Accurate information
- Change the way routine things are done
- Sleep
- Visualization
- Exercises, stretching
- Practice deep breathing
- Mindfulness & Grounding
- Affirmations
- Play time

Support healing and collaboration between parents and child by practicing these techniques together.



Ways to Support & Collaborate with Children & Parents



www.niwrc.org

- Welcoming and Comfortable Environment
- Allow for Time
- Role-model Good Relative
- Visits, not appointments
- Many parents of children traumatized by domestic violence have excellent parenting abilities and skills.
- They may be dealing with their own trauma responses, TBI or exhaustion. Support can include childcare, respite and routine breaks. (Children too!)
- Keep in mind, parents know they are being observed and often judged.

 Feelings of fear? Guilt? Responsible for offender's abuse and violence?

Reflective Capacity in Parenting



www.niwrc.org

- Being able to stand back and understand our children's state of mind, feelings, and needs...as separate from our own state of mind, feelings, and needs.
- Recognizing how traumatic experience might alter parent's reflective functioning
- Advocates can offer a trustworthy relationship that creates a safe space for the parent's own reflection
- In turn, this can support parents to become more reflective about their children's feelings and needs as separate from their own feelings and needs

Elements of a Relationship that Fosters Healing



www.niwrc.org

- ➤ Be consistent, reliable and transparent
- ➤ Join with rather than doing for [do for if exhausted, injured, ill or to show empathy and compassion!]
- Notice strengths and share your observations
- Recognize that this is a process
- Manage our responses with mindful awareness and support

Elements of a Relationship that Fosters Healing



www.niwrc.org

- > Give information that normalizes trauma- related responses
- > See child's behavior "in context" (e.g. not a "bad, mean, or lazy" kid)
- ➤ Address shame, blame, guilt "It's not your fault"
- Learn problem-solving skills, adaptive coping
- ➤ Violence is not okay

Collaboration with Parent and Child Include:



www.niwrc.org

- Supporting parents in keeping their children close to them. Even relatively independent teens may need extra support after a traumatic event.
- > Helping everyone anticipate what will happen.
- ➤ Providing reassurance when needed.
- Acknowledging strengths, skills etc.
- > Helping name the child's feelings. (teens and parents too!)
- Expecting to need to do these over and over again. It is normal for people to need repeated reassurance.

Collaboration with Parent and Child Include:



www.niwrc.org

- > Providing an environment in which they can talk about concerns.
- Offering choices.
- > Answering questions honestly.
- Helping them find ways to express their strong feelings:
 - journaling, writing stories or poems, art.
- Expecting to have to do these things again and again it's a process.

More Trauma-Informed Approaches



www.niwrc.org

- >Age considerations
- Acknowledge and be mindful about the condition and needs of parent and child(ren) "What do you need right now?"
- ➤ Use your ability to discern Can you delay or do minimal paperwork?
- ➤ Grounding "Do you need a drink of water/juice?" Breathing (make a game of it); Toy bin; Be aware of body language.
- ➤ Re-establish a safe environment Ask the parent and/or children if there is anything we should be aware of Provide examples…loud noises, smells, fears; "Is there anything David is particularly sensitive about?"

www. edutopia.org, "Supporting Children with Chronic Trauma," Micere Keels, March 2018

More Trauma-Informed Approaches



www.niwrc.org

- Recognize child/youth as individual ask child if s/he has a favorite food, movie, toy etc.
- ➤ Tone of voice, facial expressions
- ➤ Is there a rocking chair? Holding, rocking, singing, dancing
- ➤ Play with mother/parent and children
- >Keep instructions concise and clear and repeat if necessary, especially if agitated
- ➤ Give choices. When people feel respected and sense of belonging, mood often improve. "I can see that you're upset but it's not okay to yell at your mom. You can color now or we could go [make a snack]."
- ➤ Avoid ultimatums

Trauma-Informed Approaches



www.niwrc.org

- Having fun with structured family activities that promote closeness
- Offer specific praise that mirrors strengths
- Making meaning of what happened and integrating experiences (through talk, play, creative arts, writing)
 - I am worthy of love, care, and protection
 - Who I am and what I am capable of is not defined by my traumatic experiences. [Violence does not define me.]

Trauma-Informed Approaches: Focus on Advocate



www.niwrc.org

- Observe and build on strengths
- Be curious about another's experiences
- Take cues from parents and children
- Be mindful of your own responses and potential reactions
- Have a deep belief in the power of relationships to offer hope and re-connection for healing and resilience

It's about Relationships



www.niwrc.org

The traumatic impact ...[effects] relationships that children rely upon for safety, nurturance, and protection from harm...

The single most important resource for children in fostering resilience and healing from the traumatic effects of experiencing domestic violence is a secure attachment relationship with a loving parent or caregiver over time.

www.nationalcenterdvtraumamh.org

It's about Relationships



www.niwrc.org

Our roles as Relatives are essential to non-violence, accountability and healing. SAFETY is integral.

"There is no more effective neurobiological intervention than a safe relationship" - Bruce Perry

What have we been taught as Indigenous people, about how to treat our Relatives? Visitors in our homes?

PREPARATION: 1st Step in Ceremony



www.niwrc.org

- ■Self –Reflection
- Awareness of own experiences with trauma, how we are affected by the work, how we may affect others.
- Willingness to do the "self—work"
- ■What helps you stay balanced, focused, caring, effective
- Accurate information; continual learning
- Recognize professional power
- •Awareness of impact of oppression, intergenerational trauma & resiliency

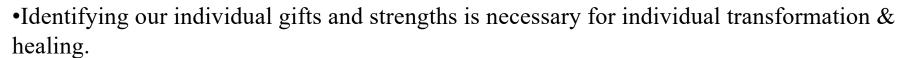
- Ability to foster control, choice & relationships
- Ability to validate fears, anger etc. avoid personalizing
- ■Responding vs. Reacting
- •Meet people where they are
- ■Look for & acknowledge, courage, strengths, survival skills
- ■Transparency; avoid surprises; explain
- Believe
- Actively earn trust

Our Culture Matters



www.niwrc.org

- •Healing As A Collective we heal together
- •Our identity and sense of belonging
- •Experiences with discrimination and oppression
- •The MEANING we give our experiences
- •Beliefs and traditions we draw upon



•Identifying our traditional/cultural gifts and strengths is necessary for healing & transformation as individuals, families and nations.



Indigenous Culture is Trauma-Informed



www.niwrc.org

- Spiritually based world view
- Values: respect, generosity, privacy and humility; spiritual realities.
- Act as Relatives
- Belief, thoughts, words
- Indigenous Medicines & Music
- Ceremony
- Safety
- Water
- Food
- Laughter





THE KEY IS RELATIONSHIPS

Trauma and violence are about breaking Relationships.

Ending violence & healing are about reconnecting and making Relationships



Remember that you are WATER Cry. Cleanse. Flow. Let Go.



www.niwrc.org

Remember that you are FIRE Burn. Tame. Adapt. Ignite.

Remember that you are AIR Observe. Breath. Focus. Decide.

Remember that you are EARTH Ground. Give. Build. Heal.

Remember that you are SPIRIT Connect. Listen. Know. Be Still.

Questions? Comments?

Thank you!

Brenda Hill
Director of Technical Assistance & Training
bhill@niwrc.org

