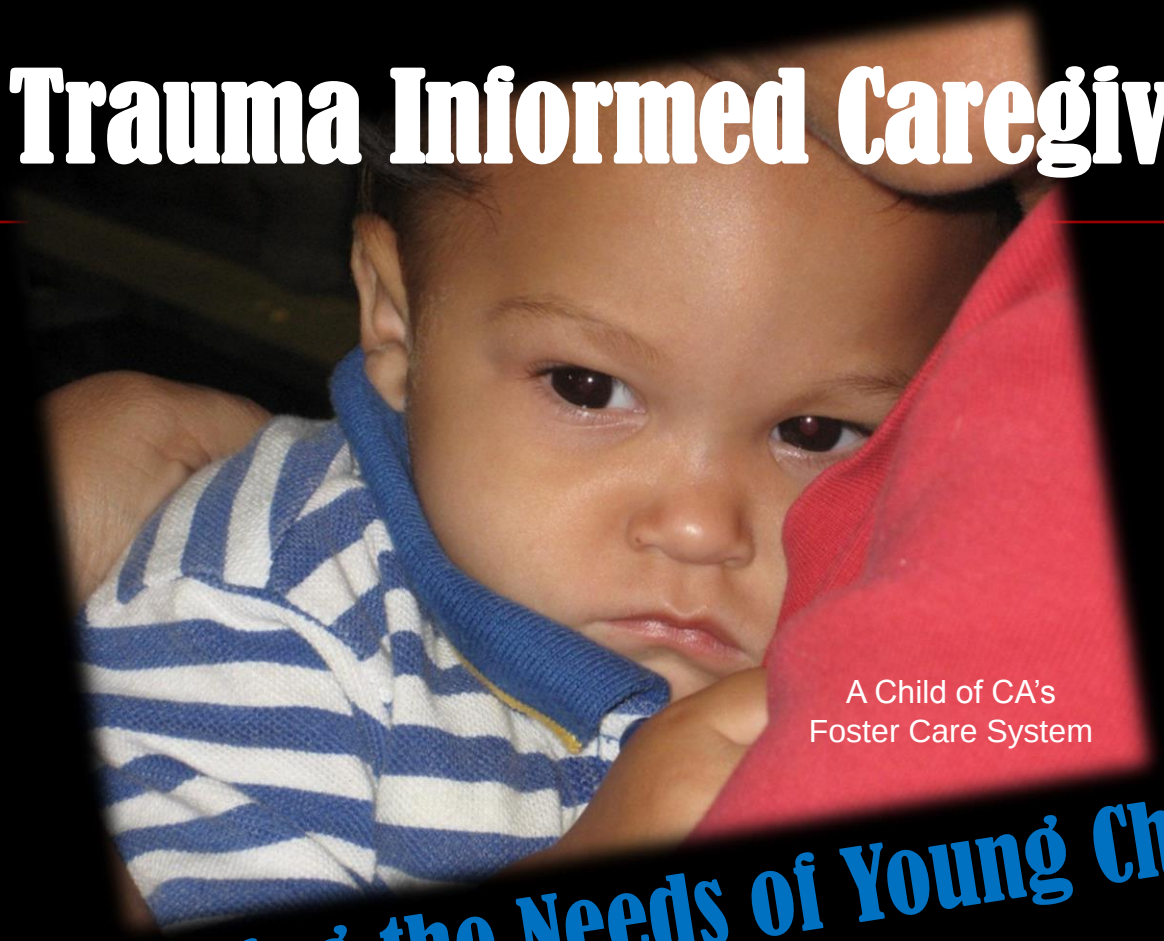
Trauma Informed Caregiving



A Child of CA's
Foster Care System

Addressing the Needs of Young Children in Foster Care

Foster & Kinship Care Education CA
Community Colleges - 2015

Our Presenters

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Woodland Community College

and

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Folsom Lake College

Foster & Kinship Care Education Programs

Regan Overholt

First 5 Yolo

Foster Adoptive Parent

Infants and toddlers are the largest single group of children entering foster care.

An Introduction
Foster & Kinship Care Education

Foster & Kinship Care Education (FKCE) provides **free** classes and workshops to individuals who are:

- Parenting a child placed in out-of-home care and you want to improve your parenting skills
- Taking care of a relative's child
- Need to complete the State mandated foster care education requirements
- Interested in being a foster or adoptive parent

The mission of Foster and Kinship Care Education (FKCE) is to provide quality education and training for care providers of children and youth in out-of-home care so that these providers can meet the child's educational, emotional, behavioral and developmental needs.

Why is it so important to be **trauma informed?**

Data Confirms:

- Infants are the fastest growing category of children entering foster care in the United States.

  - Philip Fisher at Oregon Social Learning Center
  - Mary Dozier at the University of Delaware

Stats September 30, 2012

What do we know about young children in the Child Welfare System?

- In CA, 19,349 foster children were zero to 5 years old; this represents 38% of the total population of children in foster care (July 1, 2012).
- Nationwide, 45% of infant placement into foster care occurs within 30 days of birth
- In CA, slightly more than 45% (5,425) of children who have been in care for 12-23 months are ages zero to five years old.

DATA Needell, B., et al. (2012). Child Welfare Services Reports for California. Retrieved 12/19/2012, from University of California at Berkeley Center for Social Services Research website. <http://cssr.berkeley.edu/ucb_childwelfare>

SCARS WILL HEAL BUT THE PAIN WILL REMAIN

702,000 CHILDREN WERE VICTIMS OF MALTREATMENT IN 2011 NATIONWIDE

20% OF ALL CHILD ABUSE INVOLVES VIOLENCE

5 CHILDREN DIE EVERY DAY AS A RESULT OF CHILD ABUSE

8% SUFFERS FROM PSYCHO LOGICAL ABUSE

3 OUT OF FOUR OF THESE VICTIMS ARE LESS THAN 4 YEARS OLD

1/3 OF ABUSED AND NEGLECTED CHILDREN WILL LATER ABUSE THEIR OWN CHILDREN

90% OF THE CHILDREN WERE ABUSED BY THEIR PARENTS

14% OF ALL MEN IN PRISON IN THE USA WERE ABUSED AS CHILDREN

3/4 OF THE PEOPLE IN TREATMENT FOR DRUG ABUSE REPORTED BEING ABUSED AS CHILDREN

25% OF ABUSED CHILDREN ARE MORE LIKELY TO EXPERIENCE TEEN PREGNANCY

STOP CHILD ABUSE

Children ages zero to five who have experienced trauma and/or maltreatment and are involved with the foster care system require specialized care and services to reduce the negative impacts on brain development.

Through My Eyes: Children Exposed to Violence

https://www.youtube.com/embed/7iJ1Kf0OKLM

Janice L. Cooper, Patti Banghart, Yumiko Aratani. “Addressing the Mental Health Needs of Young Children in the Child Welfare System: *What Every Policymaker Should Know.*” National Center for Children in Poverty. September 2010.

2 Douglas Goldsmith, David Oppenheim, and Janine Wanlass, “Separation and Reunification: Using Attachment Theory and Research to Inform Decisions Affecting the Placements of Children in Foster Care.” *Juvenile and Family Court Journal 55*, no. 2 (2004): 1–13.

3 Levels of Stress

Positive Stress

Brief increases in heart rate,
mild elevations in stress hormone levels.

Tolerable Stress

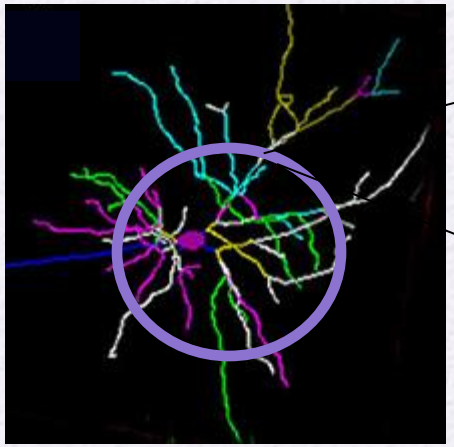
Serious, temporary stress responses,
buffered by supportive relationships.

Toxic Stress = Trauma & Disruption

Prolonged activation of stress response systems
in the absence of protective relationships.

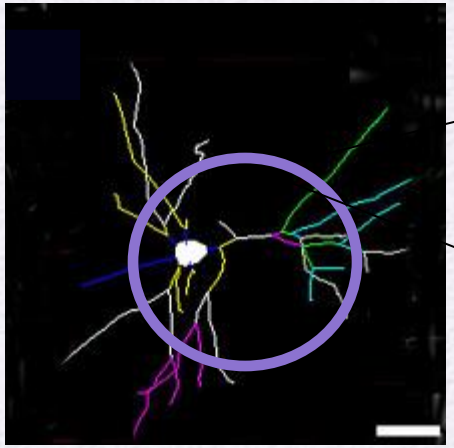
Toxic Stress: Impact Brain Architecture

Normal Neural Connections



Typical neuron— many connections

Toxic stress

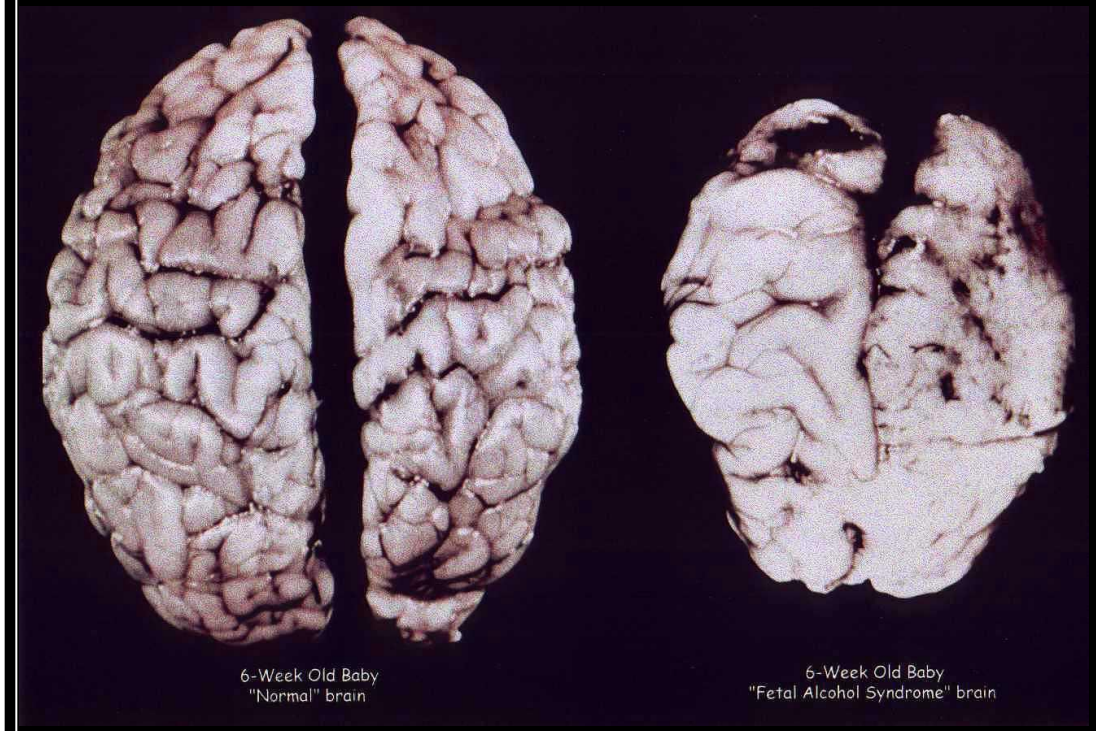


Damaged neuron— fewer connections

Prefrontal Cortex and Hippocampus

Sources: Radley et al. (2004), Bock et al. (2005)

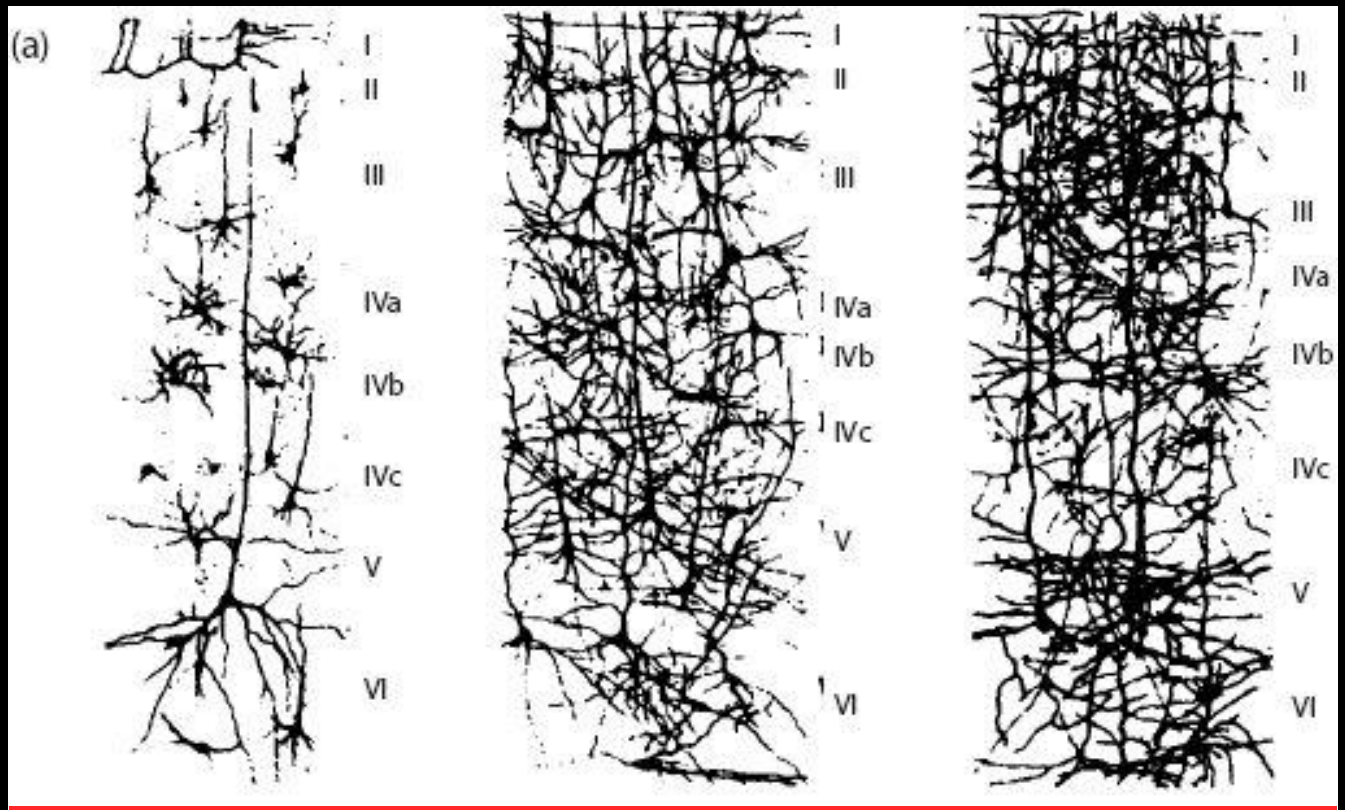
Negative Influences
begin well before birth



Critical Last Month Before Birth…

It's clear, the first 2 years are more than, "it is only a baby"…

Neural Connections



Neonate | 6 Months | 2 Years Old

And after… it may continue…

Ripple Effect of Trauma

Not: “What’s wrong with you

(a focus on symptoms)

Rather “What happened to you?

[Greek, see tere- in Indo-European roots.]

“So often, trauma happens in relationships, but it is also in relationships that healing occurs.”

~ Dr. Bruce Perry, MD

“Helping Children Recover from Trauma,” National Council LIVE, Sept. 5, 2013

Biology and Environment

For a young child, relationships are not built on biology…

Jill Duerr Berrick, PhD 2014

Trauma

Bruce Perry MD, Daniel Siegel MD, et.al,
"Trauma, Brain & Relationship: Helping Children Heal,"
www.youtube.com/watch?v=jYyEEMlMMb0 – introductory video on Attachment Disorder and development trauma.
Copies at www.postinstitute.com/dvds.

At the core of the effects of trauma is the betrayal of trust. One's ability to trust others develops throughout the life cycle. Trauma impedes the development of the qualities of trust and so hampers the overall development of the self and the ability to relate successfully to others.

When a child experiences trauma at the hands of his or her primary caregiver, he or she is most vulnerable to forming a "maladaptive developmental pattern" that greatly impairs their overall development.

"We can take the child out of the trauma; we cannot take the trauma out of the child." ~ Dan Siegel, MD

Trauma, Brain and Relationship:

Helping Children Heal

Powerful documentary featuring Bryan Post, Bruce Perry, M.D., Daniel Siegel M.D., Marti Glenn PhD and other renowned experts in the field of childhood trauma...

https://www.youtube.com/watch?v=RYj7YYHmbQs

The Baggage of Trauma for or Children in Care

Children in foster care experience:

TRAUMA for a YOUNG CHILD

- A loss of their primary caregiver.
- Threat of further abandonment.
- History of maltreatment or neglect.
- Higher rates of prenatal exposure to drugs and alcohol.

COUPLED OFTEN WITH:

- Psychopathology in first degree relatives.
- Poor longitudinal development outcomes.

Kate Rosenblum, PhD., University of Michigan

Young Children are Especially Vulnerable:

Trauma is experienced through their senses: Their sense of safety can be shattered by images, noises, or violent movements.

- With little understanding of cause and effect, they believe their thoughts, wishes, and fears have the power to become real.
- They are less able to keep themselves safe.
- They may blame themselves or their parents, a misconception of reality.
- Young children cannot express in words how they feel.
- Rapidly developing brains are very vulnerable.
- They depend exclusively on parents and caregivers for survival and protection—physical and emotional. Therefore when the trauma impacts the parent/caregiver, the relationship between the caregiver and the child may be strongly affected.
- Without the support of a parent/caregiver to help them regulate strong emotions, children may experience overwhelming stress.

From “Early Childhood Trauma” August 2010 The National Child Traumatic Stress Network

Little ones in Foster Care need special attention

Removal and disruptions:

- Disturb social relationships
- Interferes with developing brain systems
- Is traumatic for little ones; particularly those who have experienced abuse and maltreatment
- Leads to a dysregulation of behavioral, emotional and biological systems

- Infants and toddlers who are maltreated –

Are 6 times more likely than the general population to have developmental delays

- Zeanah, Charles 2009

Promoting Resiliency and Building Healing Homes

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HEALING: Is it as simple as this?

- Stable, nurturing experiences.
- Good nutrition & opportunities to explore.
- Early intervention.
- Safety & protection.
- Taking care of the caregiver.

Well… in theory!

It is known

- Infants and young children in the child welfare system biologically and emotionally need a stable, secure relationship with one caregiver.

Early experiences for very young children in foster care have long lasting consequences:

- **There is a need for:**
  - Intervention
  - Enrichment
  - Thoughtful placement
  - Life-long relationships
  - A “go-to-parent” (Dozier 2009)
  - Education of those who work and care for our most vulnerable population of foster children.

For kids under age 6, intervention offers the most promise!

- Research confirms that the early years present an unparalleled window of opportunity to effectively intervene with at-risk children.
  - Center for Social Service Research
    - Philip Fisher
    - Mary Dozier

Caregiver investment

- Caregivers of infants & children who have experienced trauma <u>must:</u>
  - Nurture the child
  - Provide consistent care
  - Be a responsive caregiver
  - Have a high level of psychological commitment

Attachment is a critical developmental task of infancy

- **ATTACHMENT** has been defined as a deep, intimate emotional 2-way connection between a caregiver and child and has its roots in sensitive, predictable care.

~Bowlby, M 1969

What is really important to promote the best developmental outcomes for our youngest children in foster care?

Circle of Security

PARENT ATTENDING TO THE CHILD'S NEEDS

I need you

Be my secure base

Support my exploration

Protect Me

Comfort Me

Delight in Me

Organize My Feelings

Be my safe haven

Welcome my coming to you

Parents & the Power of a Relationship

Resources for Early Educators & Childcare Providers

Center on the Social and Emotional Foundations for Early Learning (http://csefel.vanderbilt.edu/about.html)	*Practical Strategies for Teachers/Caregivers* (http://csefel.vanderbilt.edu/resources/strategies.html)
Head Start (http://www.headstart.org/)	*Head Start Bulletin #73: Child Mental Health* (http://eclkc.ohs.acf.hhs.gov/hslc/resources/ECLKC_Bookstore/PDFs/A6E18B91317C94E72DD233C75C4DBD7D.pdf) *Head Start Bulletin #80: Mental Health* (http://www.headstartresourcecenter.org/assets/file/Publications/Bulletin-Mental%20Health%202009v3.pdf)
National Child Traumatic Stress Network (http://www.nctsn.org)	*Child Trauma Toolkit for Educators* (http://www.nctsnet.org/nctsn_assets/pdfs/Child_Trauma_Toolkit_Final.pdf *Caja de Herramientas Para Educadores Para el Manejo de Trauma Infantil* (http://www.nctsnet.org/nctsn_assets/pdfs/SP_Child_Trauma_Toolkit_111009_FINAL.pdf))
Scholastic for Teachers (http://www2.scholastic.com/)	Library of articles by trauma expert Bruce D. Perry, MD, PhD (http://teacher.scholastic.com/professional/bruceperry/index.htm) Greenspan, S. I. (2002). Meeting learning challenges: Working with the child who has PTSD. *Scholastic Early Childhood Today.* Perry, B. D. (2006). Death and loss: Helping children manage their grief. *Scholastic Early Childhood Today.*

Print Resource

Rice, K. F., & Groves, B. M. (2005). *Hope and healing: A caregiver's guide to helping young children affected by trauma.* Washington, D.C.: Zero to Three Press.

Areas for Collaboration:
National Model:
Ounce of Prevention Fund

- Level I – Promotion
  - Supportive of maternal emotional needs during pregnancy and prepare family for adjustment
  - Help caregivers better understand normal range of social and emotional development for children under 5
  - Build parent confidence and satisfaction in the relationship with their child
  - Provide strategies for understanding and conflict negotiation with a young child to promote pro-social behavior
  - Screening children under 5 for social and emotional concerns as part of a global developmental assessment and referring for additional evaluations as needed

Ounce of Prevention Fund

- Level II – Prevention
  - Making recommendations for developmentally appropriate ways to interact with the child
  - Help caregivers recognize the unique strengths of the child and family while helping them to use them to promote resilience
  - Identify emotional and behavioral concerns as well as challenges in the parent child relationship and making recommendations to enhance responsive caregiving
  - Using videotaped interactions between parent and child to reinforce nurturing caregiving and guide understanding of the child's cues and behaviors
  - Assessing environmental risk factors and making referrals as needed
  - Parenting education and parent support groups
  - Case consultation with and early childhood mental health specialist
  - Connecting the family with diagnostic and intervention services as needed

Ounce of Prevention Fund

- Level III – Targeted Intervention
  - Assessing the nature of a particular disturbance within the family and cultural context
  - Providing specific techniques for addressing the child's behavioral symptoms
  - Videotaping interactions between the parent and child to help the parent become more aware of his or her positive and negative interactions with the child
  - Helping parents explore and understand the impact of their own childhood memories on interactions with their children
  - Coaching parents about developmentally appropriate ways to interact with the child both verbally and non-verbally
  - Play, art and music therapy for preschool children
  - Assisting parents in obtaining additional needed support and services (e.g., treatment for depression, mental illness, substance abuse)

http://www.ounceofprevention.org/about/index.php

Local Models

PEAK Solano Program

- PEAK = Partnership for Early Access for Kids
- Solano County-wide collaborative of over 60 public and private agencies working with children prenatal through age five with the mission of earlier identification and intervention of infants and young children needing developmental, health, and social emotional/early childhood mental health services
- Key Services
  - Parent and Caregiver Education and Training
  - The Provider Education and Training
  - Screening and Assessment
  - Parent Coaching
  - Limited Short Term Treatment Services

Yolo First 5 Supporting Local Foster Care

FIRST 5
YOLO
Children and Families Commission

Yolo County Children's Mental Health Task Force

Participating Partners

- Aldea Children and Family Services
- CommuniCare Health Centers – Davis Community Clinic, Peterson Clinic (Woodland), and Salud Clinic (West Sacramento)
- Davis Developmental Pediatrics Group, Inc
- EMQ-Families First
- Victor Community Support Services
- Warmline Family Resource Center
- Winters Healthcare Foundation
- Woodland Community College – Foster & Kinship Care Education
- Woodland Healthcare
- Yolo Family Resource Center
- Yolo County Children's Alliance – Step by Step/Paso a Paso
- Yolo Family Services Agency
- First 5 Yolo
- Yolo County Alcohol, Drug and Mental Health
- Yolo County Public Health Department
- Yolo Early Support Team (YES Team)
- Washington Unified School District

Thank You

for Having Us

With You Today!

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