

Post-traumatic Stress in Children



Skunks & Porcupines

A BRIEF OVERVIEW

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Traumatic Experience and the Brain ISBN

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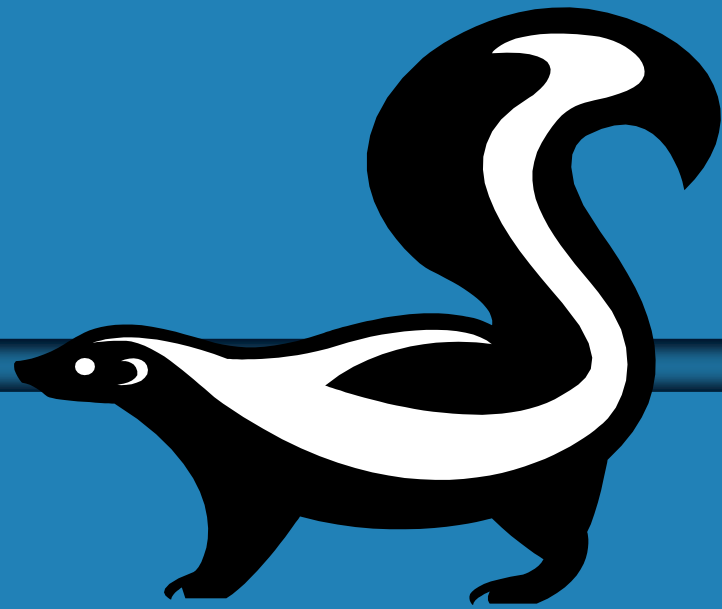
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SKUNKS & PORCUPINES





All traumatized children
need help to understand
themselves and develop a
positive self-perception.



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positive self-perception.

What is TRAUMA?

- *TRAUMA - A bodily or emotional shock to the system*

Other helpful definitions:

- *CRISIS - The point that determines a good or bad outcome*
- *DISASTER - cause of much damage*

CRISIS

RESPONSE...

Definition of Crisis: a response to an event wherein:

- 1. An individual's psychological homeostasis is disrupted.
- 2. One's usual coping mechanisms have failed, and
- 3. There is evidence of distress and significant functional impairment



Three TYPES OF Stress

1. FRUSTRATION:

**Prevention of achieving a goal
or one's needs not being met.**

**Mostly is generated
from an external source.**

Three TYPES OF Stress

2. CONFLICT:

**Tension generated by
incompatible inner needs or drives.**

**We want to achieve
two or more competing goals.**

Three TYPES OF Stress

3. PRESSURE:

The necessity or urgency of matters demanding immediate attention and needing to be accomplished rapidly and/or accurately.

ALL THREE USUALLY INVOLVED

- *Most stressors / events provide a combination of all three types of stress in varying proportionality:*
 - *FRUSTRATION*
 - *CONFLICT*
 - *PRESSURE*

TYPES OF TRAUMA

- **PHYSICAL...**
- **PSYCHOLOGICAL...**
- **SPIRITUAL...**



PHYSICAL STRESS

- **PHYSICAL—**

An insult to the body's vital system that controls

life's normal life processes.



PSYCHOLOGICAL STRESS

PSYCHOLOGICAL -

**Insult to the psyche
resulting in
emotional distortion
and coping obstruction.**

SPIRITUAL STRESS

An insult

which calls into question one's standard

assurances and convictions

about one's own worthiness

and worthwhileness

and/or

God's function and character.

FIRST AID - CRISIS INTERVENTION

- **Psychological “First Aid” --**

As physical first-aid is to surgery,

Crisis intervention is to psychotherapy

- 1. Symptom stabilization
- 2. Symptom reduction
- 3. Re-establish functional capacity
- 4. Seek further assessment and/or a higher level of care.



- **Begin by assessing the self-perception of the child.**
 - **Art therapy**
 - **Play therapy**
 - **Other Activities in which they will participate, in...maybe even in the class you teach!**

Children's Leaders...

- In training up the next generation, often today's parents have not been instructed themselves
 - In raising children ("Latch-key")
 - (When were they instructed?)
 - By example?!

Who instructed your parents?



Teacher attitude adjustment:

- **Consider all problematic behavior within the context of survival to better understand it.**
- **This may help you answer the question, “Why does she/he keep doing that?”**

Survival:

- **For traumatized children, adaptations of perceptions, emotions, and behavior were initially helpful for self protection, but when safe, the child does not immediately adjust.**
- **Just because the child's responses do not make sense to you does not mean they do not make sense to the child**

Behaviors produced by Trauma

- **Overt Behaviors:**

- **Aggressive**
- **Reactive**
- **Histrionic**
- **Blaming**

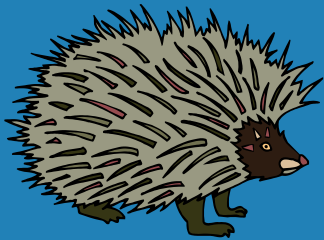
Explosive
Grandiose
Demanding
Self abuse

- **Covert Behaviors:**

- **Lying**
- **Spacing out**
- **Self-abuse**
- **Sexualized covert acts**

Being sneaky
Giddy or silly
Enuresis/Encorpresis

Porcupines & Skunks



They learn how to keep people away.

The behaviors are the outward manifestation of the inner issues of the child, so interventions cannot just treat the symptoms

Porcupines & Skunks



- **Many behaviors are repulsive to others, and for good reason; they are meant to be.**
- **Children hope to be less a target of someone in the environment by being**
 - **repulsive** **unpleasant**
 - **verbally abusive** **smelling bad**
 - **smearing blood** **hurtful**
 - **and other unpleasant self-protective acts.**



Porcupines & Skunks

- **Behavior is the outward manifestation or the result of the brain's internal processes.**
- **Because behaviors are external they are an easier focus of interventions but effective intervention will also need to treat the complex internal causes of the behavior. #**



Adults **MUST** be the source
of insight
in the beginning
of any intervention



Positive Feedback:

- **Give traumatized children continual feedback about observed strengths.**
- **Traumatized kids have usually heard lots of negative feedback and need more positive responses for balance**
- **Prescribe the symptoms,**
 - **“I doubt you will agree with me but you are very good at _____.”**

Give positive support:

- **The more the child experiences positive support the better this experience is processed by the brain.**
- **The pace may be slower than you notice, but the brain processes positive experience better with each repetition.**

*Adults MUST be the source of insight
in the beginning of intervention*

Holes in learning:



- Part of any trauma intervention process is to **identify what the child missed while he was preoccupied with concerns of survival.**

Holes in learning:



- **Deprivation from neglect means the child will undoubtedly have developmental holes in areas such as language skills, socialization, daily living skills and ...**

Executive functioning—

- *-- the most complex functions of the brain—*
- *It determines the personality, goals, the decisions and the success or failure of the human being.*

Executive Functioning

A term used over the last decade to identify some of the highest levels of functioning – a combination of interrelated functions that produce purposeful, goal-directed, problem-solving behavior:

- **Initiating**
- **Planning**
- **Shifting**
- **Self monitoring**
- **Reasoning**
- **Cause and effect**
- **Concrete & abstract thought**
- **Inhibiting**
- **Organizing**
- **Emotional control**
- **Working memory**
- **Weighing choices & decisions**
- **Delaying actions**

Default modes:

- **It is important to understand negative emotional and behavioral default modes.**
- **Traumatized children often revert to the most negative context of any situation.**
- **Expect this and you will be better prepared to handle the situation.**



6 types of memory



- **Behavioral**
- **Perceptual**
- **Emotional**
- **Factual**
- **Auto-biographical**
- **Body memory**

◆ (Siegel, 1999) divided these types of memory into implicit and explicit memory.

◆ Each type has some differences from the others, yet the types are often linked

implicit and explicit memory.

- **Much of what the child “remembers” about the trauma is not about facts.**
- **Do not expect the child’s inner experience or memory to make good sense.**
 - **it is internal, personal and not logical.**
- **Facts are important in legal matters, but internal experience or implicit memories may be more important in psychological matters.**



IMPLICIT MEMORY

- **Implicit memory refers to what the infant brain is fully prepared to do from the first experience.**
- **There is no requirement of previous experience because implicit memory does not rely on information processing.**



IMPLICIT MEMORY

- **As experiences accumulate and neural networks become associated due to repetitive activity, areas of the brain involving implicit memory build automatic representations based on sensations, images and emotions.**

IMPLICIT MEMORY

- **Implicit memory is fundamental to how the brain stores traumatic representations**
- **Implicit memory is ready to function immediately and is an important aspect of survival**
- **Due to the immediate need for this brain function, it must be mediated by regions of the brain that are well-developed early in life-**
 - **amygdala, septum, and overall limbic system**

IMPLICIT MEMORY

- **Good news – the limbic system helps a child survive traumatic experience without the need for cognitive processing.**
- **Bad news – the traumatic memories are stored in the limbic system and are unavailable for cognitive processing. When trauma occurs early in life recollections are deeply embedded physiologically and can continue later in life.**
 - (Valent, 1998; van der Kolk, 1996)

EXPLICIT MEMORY






EXPLICIT MEMORY

- **Explicit memory refers to those aspects of brain functioning people think of as memory**
- **Explicit memory includes facts, figures, names, places, and the where, when and why of human experience**
- **Explicit memory is a process. We are aware of it. We usually have the ability to recall this information.**



EXPLICIT MEMORY

- **Explicit memory develops with experience and history – therefore it develops well after implicit memory.**
- **Memory becomes a problem when experiences overwhelm the capacity of the brain to take in and process the situation – at the core the trauma sensitizes the child’s system to the “**prime directive**” of the brain – **SURVIVAL!****




When survival is perceived to be in question, all bets are off when it comes to responding, coding or storage of info.

UNAVAILABLE RECALL

- For children traumatized very early in life, the storage of trauma in the limbic system remains very strong and is **unavailable for normal cognitive recall** or processing –
- The child is not able to recall why they feel or act as they do – they simply switch to autopilot – **ROBOT.**
 - **the brain provides an internal means of escape.**

The ultimate endpoint of chronically experiencing catastrophic states of relational-induced trauma in early life

is a progressive impairment of the ability to adjust, take defensive action, or act on one's own behalf, and a blocking of the capacity to register affect and pain, all critical to survival. • (Lansky, 1995)



Stress can build resilience
and the Capacity to

handle a wider range of
new experiences,

Or

Stress can diminish the brain's and the body's
ability to handle even minor challenges.




Stress in the body activates
the brain,

which in turn activates the
nervous systems of the body.

It is the job of the sympathetic
nervous system to turn the body's
stress response on...

The FIGHT or FLIGHT
Response

- 
- When the sympathetic nervous system is activated in children,
 - they can neither fight nor flee.
 - The child is left with two basic choices – system hyper arousal and/or dissociation.
 - Neither is a positive experience for the child.

- 
- These stressful experiences lead to more and more difficulties

- such as hypervigilience and being inattentive.
- A traumatized child will often ignore the teacher's attempts to assign reading or science because this information has no immediate relevance for survival and will be ignored.

TYPICAL REACTIONS TO A TRAUMATIC EVENT SYMPTOMS OF CRITICAL INCIDENT STRESS

ADHD ????

COGNITIVE

Blaming someone

Confusion

Poor attention

Raised alertness

Nightmares

Poor decisions

Lowered alertness

Flashbacks

Poor concentration

Hypervigilance

Impaired thinking

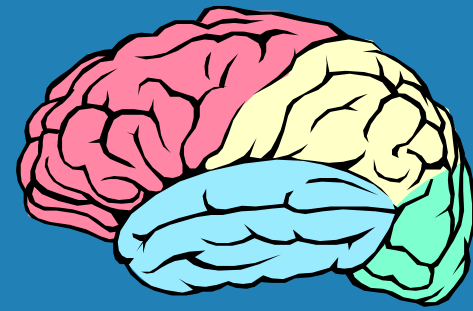
Loss of orientation

Memory problems

Poor problem solving

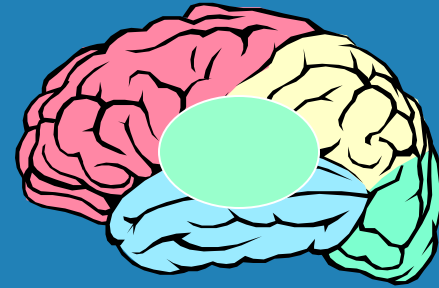
Poor abstract thinking

Brief View of How the Brain Works

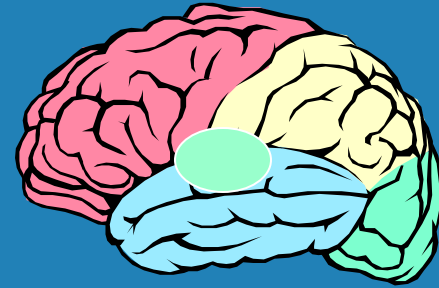


- **Within the next few years our current understanding of the functions of the brain will likely be viewed as quite primitive.**
- **The concept of specific parts of the brain or separate brain systems being singularly responsible for any function of the brain or body is controversial.**

The Limbic System

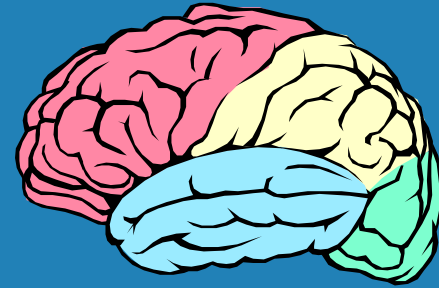


- **There are very complex aspects of the body controlled by the limbic system that involve survival:**
 - **Reproduction and sexual behavior**
 - **Attachment that can determine survival early in life and success as a social person later in life**
 - **Motivation – another complex issue**



- **Another part of the Limbic System – The hippocampus is involved in verbal and emotional memory.**
- **Memory stored in the limbic area is primarily affective experience.**
- **The hippocampus is very vulnerable to traumatic stress.**

The Limbic System



- **It is common for traumatized individuals to have arrested emotional maturity around the age of abuse.**
- **Some adults abused as children regress to childhood emotional responses when facing severe stress** (Nijenhuis, Vanderlinden & Spinhoven 1998)

The expression “use it or lose it” applies more to the brain than perhaps any other aspect of human physiology (Petty 2000).

- **At birth the brain is more potential than actual, with 75% of its functioning ready to be “programmed” or learned.**
- **By age 3 the brain is actually three times more active than an adult brain and has many times more available neurons (100 billion) and synaptic connections (1,000 trillion) than at any other time of life.**





Intervention Points

- **Avoid indiscriminate arousal of the fight or flight response.**
- **It is very important not to unintentionally stimulate arousal of this survival response.**
- **When this happens, maladaptation is reinforced.**



Intervention Points

- **Most negative behaviors were useful adaptations at some point.**
- **It is often helpful to look for the ways problematic behaviors played a functional role in the past.**



Intervention Points

- **The significance of the trauma is based on how strong, how long, how many dimensions, and how overwhelming.**
- **The degree to which an experience is overwhelming is linked to the child's support system at the time.**



Intervention Points

- **When there is information on when trauma occurred, consider what the child missed developmentally at that time.**
- **Part of the intervention will need to address what the child missed along the way.**
- **Teach the child how to become stressed and then how to become relaxed.**



Intervention Points

- **Have the child describe where she feels she is and is not in danger.**
- **Gradually you can help her feelings align with new perceptions of safety**
- **Work to increase the amount of play in the child's life. The odds are the child has a lot of play to catch up on.**

Intervention Points

- **Learning anything other than what is required to survive (primary importance) is relegated to irrelevance for the traumatized child**



Intervention Points

- **Very little information taught in schools, including reading, writing and math is directly related to survival...**
- **... this information is thus perceived to be of little or no value to many traumatized children.**



The Importance of **PLAY**

- **A devastating result of deprivation of experience is the loss of interest in and ability to play.**

- **If a child is not playful, we cannot consider her to be inherently healthy.**

- **Play builds imagination, mimicry of behavioral skills, and perhaps most importantly, our ability to have fun.**



Intervention Points

- **Although we do not list play and having fun among the key experiences of schooling, they are absolutely essential for healthy development**
- **Usually, we do not consider fun to be a goal in school because most children bring fun and playfulness with them.**



Intervention Points

- **Recess is often seen as a break in school, but NOT for the traumatized child.**
- **Recess will be the most difficult period of the day.**
 - **Unable to play, not sure what the point of having fun is; lacking trust in others.**
 - **They are a fish out of water on the playground.**
 - **These children lack skills or the interest to interact with peers. When they do, they quickly become either aggressor or victim – mimicking the experience they know best.**

Intervention Points

- **There is a fundamental difference in the perception of others by healthy children and by traumatized children**
- **Healthy Children** generally:
 - **Seek, enjoy, connect with others in their world**
- **Traumatized children** generally:
 - **Avoid, fear, push others away except for an essential few who assist them with survival.**




Intervention Points

- **Do not make the common mistake of teachers (who want the child to LIKE them) of giving things.**
- **There is nothing wrong with doing something special once you have established a solid working arrangement with the child – “something for nothing” is heading in the wrong direction**

Intervention Points

- **Without respect –
no positive intervention is possible.**
- **To obtain respect be safe, consistent, clear, unruffled, firm, smart and sure of yourself.**
- **The child will probably not like you for being all these things, but they are essential for there to be a connection with the child.**




Respect is related to safety, and is pivotal to how the child perceives you.



Intervention Points

- **It matters very much how the child **perceives** you.**
- **Consider where the child has categorized you and make adjustments as soon as possible**
- **Your ability to make a difference with the child depends on how you are being perceived.**

- 
- **The brain experiences
what it **perceives** is occurring**
 - **Perceptions become reality for
traumatized individuals.**
 - **Perception of self**
 - **Perception of others**
 - **Perception of the world**

Have these children experienced



Trauma?

Reality is –
We don't know.

One cannot
automatically assume
one way or another.

Grace with children is
essential.

Skunks & Porcupines – so much more to share regarding children affected by Trauma:

This presentation is simply covering tips of icebergs. Contact us today to schedule a private, corporate, individual, or group training: Donations accepted.

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