

**BEGINNING THE CONVERSATION:
TRAUMA INFORMED EARLY CHILDHOOD SERVICES
(TIECS)**

**2016 Conference on School Culture, Climate, & Positive
Behavior Support**

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TRAUMA-
INFORMED
EARLY
CHILDHOOD
SERVICES
TRAINING

The **Community Health Institute** supported the **NH Department of Health and Human Services/Maternal and Child Health Section** and early childhood trauma experts affiliated with the **Department of Psychiatry at Dartmouth** to implement this training project for providers of early childhood services, including: child care, home visiting and health and mental health services in 2014-2015

- Having a deep understanding of trauma and its impact on the whole child and caregivers
- Effectively screening, triaging, referring, and intervening with traumatized children and caregivers
- Organizations employing trauma-sensitive practices such as
 - Language used in conversations, documents, and practice evidence an understanding of the child and family's behavior within the context of trauma

But why should we talk about it
and understand trauma?

LET'S TALK
ABOUT
CHILDHOOD
TRAUMA

- **it is hurting the children and parents**
- **it's a major public health burden**
- **it is treatable**
- **children deserve a voice**
- **it reduces secrecy and shame**
- **the earlier we address it the better chances the child can heal**
- **WE CARE!!**

WHAT IS HAPPENING NOW?

Local and National Awareness and Focus:

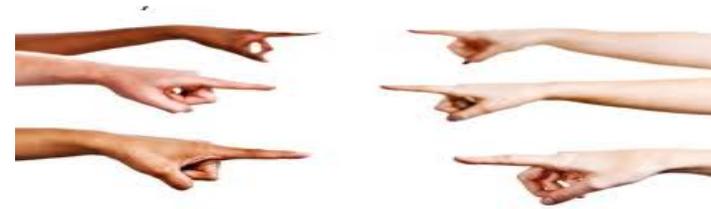
- National: Federal Funding requiring the knowledge base (HRSA, SAMHSA, etc.)
- State/Local: DCYF, ECCS, Maternal and Child Health Home Visiting, Screening and Referral, NH Behavioral Health Collaborative, Dartmouth Trauma Informed Research Center

WHO SHOULD ASK CHILDREN OR CAREGIVERS ABOUT TRAUMA?

All of Us!

But what usually happens?

- “It’s not my job”
- “I’m not qualified”
- “I’m not comfortable”
- “That’s not my role”



But if you don't who will?

SO WHAT IS A TRAUMATIC EVENT?

(DSM-5) Exposure to actual or threatened death, serious injury, or sexual violence in 1 or more of the following ways:

1. **Direct**
2. **Witnessing** (not only electronic/other)
3. **Learning about** traumatic event for caregiver
4. **Repeated exposure to aversive details** (not for 6 and younger)

The 3 E's: trauma is the sum of the **event**, the **experience**, and the **effect** (SAMHSA)

Acute Trauma

- Single traumatic event that is limited in time
- During an acute event, children go through a variety of feelings, thoughts, and physical reactions that are frightening

Chronic Trauma

- The experience of multiple/varied traumatic events (e.g., being exposed to DV and then being in a serious car accident, or ongoing abuse/neglect)
- The effects of chronic trauma are often **cumulative**

Complex Trauma

- Both the exposure to chronic trauma and the impact of such exposure of a child
- Children who have experienced complex trauma have endured multiple interpersonal traumatic events from a young age
- **Has profound effects on nearly every aspect of development and functioning**

Neglect

- Failure to provide for a child's basic needs
- Perceived as trauma by an infant or young child who is completely dependent on adults for care
- Opens the door to other traumatic events
- **May interfere with a child's ability to recover from trauma**

Individual Characteristics

- Child's age and stage of development
- Prior history of trauma
- Intelligence
- Strengths and vulnerabilities of personality style; coping and resiliency skills
- Individuals culturally based understanding of the trauma

Environmental Characteristics

- Immediate reactions of caregivers or those close to child
- Type of, quality of, and access to constructive supports
- Attitudes and behaviors of first responders and caregivers
- Degree of safety afforded the victim in the aftermath
- Prevailing community attitudes and values
- Cultural and political constructions of gender, race, and sexual orientation

Characteristics of the Traumatic Event(s)

- Frequency, severity, and duration
- Degree of physical violence and bodily violation
- Level of terror and humiliation involved
- Persistence of threat
- Physical and psychological proximity to the event (i.e., when person is not the victim)

YOUNG
CHILDREN'S
VULNERABILITY
TO TRAUMA

- **Old beliefs that trauma does not impact the very young have been debunked by science**
- **Infants and young children are particularly vulnerable to trauma and toxic stress**
- **Rapid brain development, neuro-circuitry being “wired”**
- **“Sensitive” periods for development in all areas: social, emotional, cognition/language, physical**

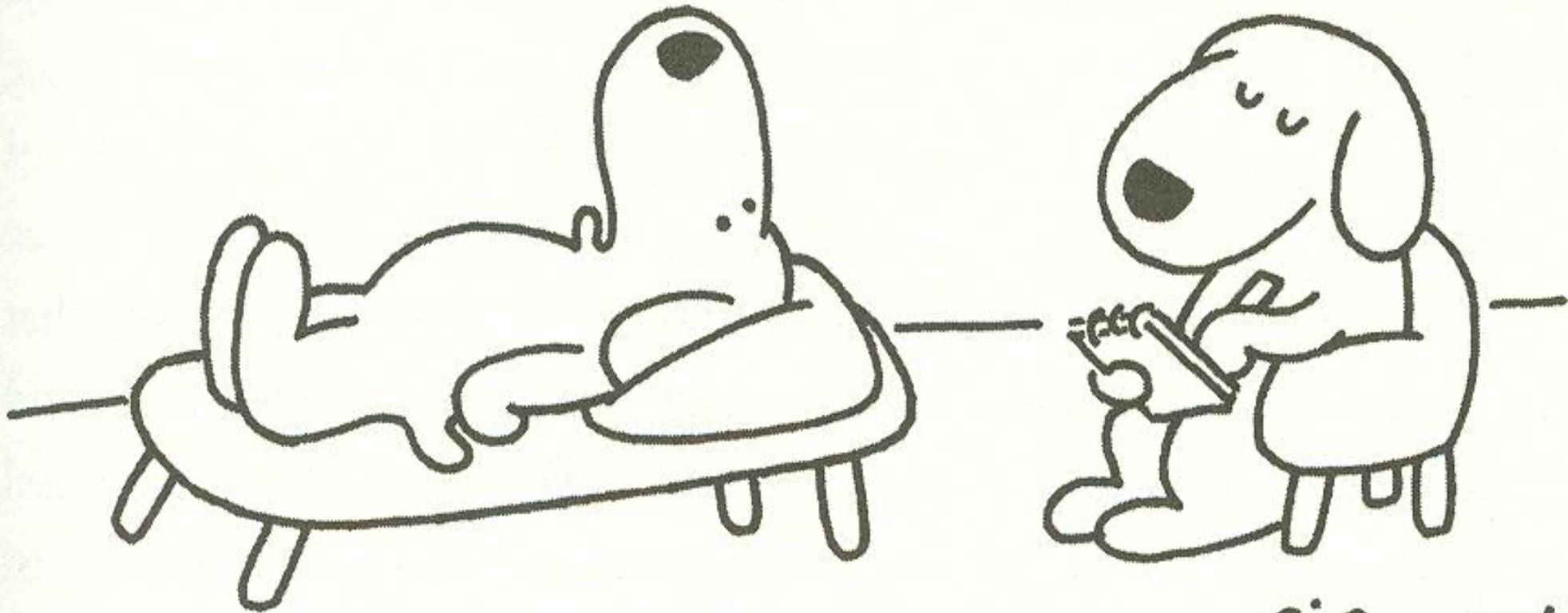
EXPERIENCES SHAPE THE BRAIN

CENTER FOR THE DEVELOPING CHILD: HARVARD UNIVERSITY

(1:58)

Video Exercise: Experiences Build Brain Architecture

http://developingchild.harvard.edu/resources/multimedia/videos/three_core_concepts/brain_architecture/



C. Barretti

"I bark at everything. Can't go wrong that way."

SIGNS OF A DESENSITIZED STRESS RESPONSE SYSTEM

- “Freeze” moments
- Staring, shutting down
- Not responding, withdrawal
- Hiding
- “Oppositional” behavior

3-Year-Old Children



Normal



Extreme Neglect

***“Resilient children are made
not born”*** (Perry, 2006)

NEW
RESEARCH,
NEW HOPE

Research now demonstrates that
neurons grow and change with
NEW healthy experiences- but it
takes ***lots and lots of them***

BUILDING

RESILIENCY: WHAT DOES IT LOOK LIKE?

- It is created by patterns of manageable, predictable (normal) stress. Moderate levels of stress makes us stronger
- What are some examples of normal, moderate stress for children?
- What makes stress manageable for young children?

WHAT CAN WE DO AS TEACHERS?

- Be predictable
 - Routine, rituals, people, places, things
- Low and Slow (Bolick)
- PACE Approach to care giving (Hughes, 2012)
 - Playfulness
 - Acceptance, unconditional positive regard
 - Curiosity
 - Empathy

“NAME IT
TO TAME
IT” (SIEGEL,
2012)

- Identify emotions & traumatic responses
- Putting words to emotions allows us to make meaning of experiences and to gain a sense of control
- Teaching kids that emotions come and go (“let the clouds roll by”) helps them to observe their emotions and anticipate something different

“ENGAGE, DON’T ENRAGE”

(SIEGEL, 2012)

- Teach kids about implicit and explicit memory
- Show them how they can gain a sense of control over experiences by THINKING about their own feelings and reactions

FOR MORE INFORMATION OR FOR TRAUMA INFORMED
TRAINING:

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