The Integration of Trauma and Foster Care

Approximately five million children each year in the United States experience some type of traumatic experience, with significant traumas often associated with adverse effects on a child's self-esteem, coping skills, school performance, self-regulation, and critical thinking. Moreover, among the hundreds of thousands of children coming into contact with the child welfare system every year, high rates of these youth continue to report having faced significant trauma. It is estimated that approximately 90% of youth in foster care have experienced a traumatic event, with nearly half reporting exposure to four or more types of traumatic events. Compared to the general population, youth in foster care are significantly more likely to have experienced violence, abuse, and/ or neglect. For children and adolescents in foster care, trauma is not just common, but often chronic and cumulative.

Given the widespread prevalence of traumatic exposures, it is important for us, as mental health professionals, to be aware of the prevalence and various types of trauma that are most common among children in foster care. Understanding the link between how traumatized children in foster care understand the world and interact with others helps us provide appropriate interventions that promote the most effective outcomes in the development, behavior, and interpersonal relationships of these youth. Screening, assessing, and providing resources for children and families in foster care must be met with a resilience framework, ensuring the continuity of care across child-serving systems and minimizing secondary trauma as much as possible. It is critical that, once needs are identified, children and youth are connected with culturally competent and trauma-informed services that match their specific needs.

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St. Louis Foster Care Resources

Washington University in St.Louis
Physicians

Trauma Response Program

What is Trauma?

A trauma response is a reaction to a threatening or harmful occurrence. It doesn't matter whether the danger is actual or perceived, as long as it's a threat to the child or someone close to him or her. Trauma may be the outcome of a single traumatic incident or it can develop over time as a result of repeated exposure to traumatic situations.

Among the potentially stressful occurrences are the following:

- Abuse (physical, sexual, or emotional)
- Being isolated from family and friends
- Bullying
- Witnessing an act of violence against a family member or pet (for example, domestic or community violence)
- Natural disasters or human error
- Parental conduct that is unpredictable as a result of addiction or mental illness

Being in the child welfare system becomes another terrible occurrence for many children. This is true for both the child's first separation from his or her home and family and subsequent placements.

Effects of Trauma on Children

Children are tenacious. Stress in their life (e.g., leaving caretakers for a day at school, riding a bike for the first time, feeling apprehensive before a game or performance) stimulates brain growth and the development of new abilities.

However, trauma happens when a stressful event (such as being mistreated, neglected, or bullied) overwhelms a child's innate capacity for self-regulation. These events trigger a "fight, flight, or freeze" reaction, altering both the physical state of the body—such as increased heart rate and blood pressure—and the way the brain sees and reacts to the environment.

In many circumstances, a child's body and brain heal swiftly and without permanent damage after a potentially stressful encounter. However, trauma disrupts normal development in certain children and may have long-lasting impacts.

Understanding a Child's Behavior

When children are exposed to stress, especially many traumatic incidents over time, their bodies, brains, and nervous systems adapt to protect them. This may manifest as greater hostility, mistrust of or disobedience toward adults, or even detachment (feeling disconnected from reality). When children are threatened, these actions may be necessary for survival. However, after children are relocated to a safer setting, their minds and bodies may fail to register the absence of threat. These defensive actions, or habits, have developed strength as a result of their frequent application (just as a muscle that is used regularly grows bigger and stronger). It takes time and retraining to teach those "survival muscles" that they are no longer necessary in their new circumstances (a new house) and may relax. It may be beneficial to keep in mind that a kid's disruptive conduct may be a taught reaction to stress—it may even have been what kept the youngster alive in a highly dangerous scenario. It will take time and patience for a child's body and brain to develop more suitable responses to his or her present, safe surroundings.

SIGNS OF TRAUMA IN CHILDREN OF DIFFERENT AGES

Young Children (Ages 0–5)

- Irritability, "fussiness"
- Startling easily or being difficult to calm
- Frequent tantrums
- Clinginess, reluctance to explore the world
- Activity levels that are much higher or lower than peers
- Repeating traumatic events over and over in dramatic play or conversation
- Delays in reaching physical, language, or other milestones

School-Age Children (Ages 6–12)

- Difficulty paying attention
- Being quiet or withdrawn
- Frequent tears or sadness
- Talking often about scary feelings and ideas
- Difficulty transitioning from one activity to the next
- Fighting with peers or adults
- Changes in school performance
- Wanting to be left alone
- Eating much more or less than peers
- Getting into trouble at home or school
- Frequent headaches or stomachaches with no apparent cause

Teens (Ages 13–18)

- Talking about the trauma constantly, or denying that it happened
- Refusal to follow rules, or talking back frequently
- Being tired all the time, sleeping much more (or less) than peers, nightmares
- Risky behaviors
- Fighting
- Not wanting to spend time with friends
- Using drugs or alcohol, running away from home, or getting into trouble with the law

TRAUMA TRIGGERS

When a child behaves in an unusual, unreasonable, or excessive manner, he or she may be experiencing a trauma trigger. A trigger is an element of a traumatic experience that happens in an entirely different context yet serves as a reminder to the child of the original occurrence.

Examples include noises, odors, emotions, locations, postures, vocal tones, and even emotions. When adolescents have been exposed to traumatic situations, they may replay old behaviors when they feel uncomfortable or come across a trigger. Depending on whether the child is responding with a "fight," "flight," or "freeze" reaction, the child may seem to be throwing a tantrum, refusing to listen, or challenging you. However, reactions to triggers should be seen as reflexes—they are neither intentional nor planned.

When a child's body and mind are overwhelmed by a traumatic experience, they are unable to evaluate the ramifications of their action or how it affects others.

# HOW FOSTER PARENTS CAN EMPOWER THEIR CHILDREN

- Identify Trauma Triggers
- Be Emotionally and Physically Available
- Respond, Don't React
- Avoid Physical Punishment
- Don't take Behaviors Personally
- Listen
- Be Consistent and Predictable
- Be Patient
- Allow Some Control
- Encourage Self-Esteem
- Encouraging Relax Behaviors

EFFECTS OF TRAUMA ON CHILDREN

Body
- Inability to regulate bodily reactions to stress
- Chronic sickness, which may persist into adulthood (heart disease, obesity)

Brain
- Difficulty thinking, learning, and focusing
- Impairment of memory
- Difficulty transitioning between thoughts or activities

Emotions
- Low self-esteem
- Inability to manage/regulate emotions
- Difficulty building ties to caregivers & maintaining friendships due to trust issues

Behavior
- Fighting, aggression, running away
- Substance abuse / Suicide
- Lack of impulse control

Reading Suggestions
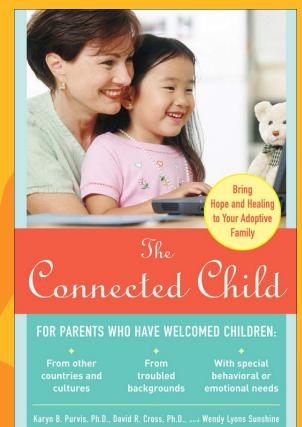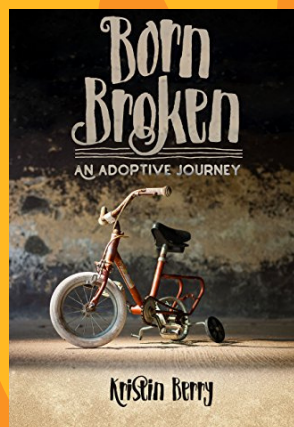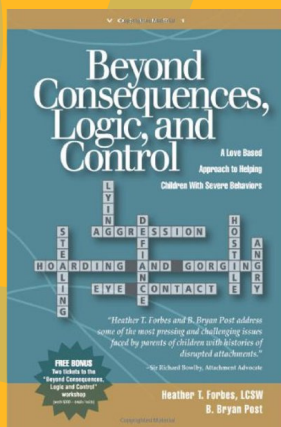
Foster and Adoptive Care Coalition

1750 S Brentwood Blvd #210, Brentwood, MO 63144

Phone: 314-367-8373

- Extreme Recruitment
  - Assigned professional team members work intensively with youth ages 10-18 to find home permanency
  - Reconnects youth with a network of safe, appropriate adults and matches youth with an adoptive family
- 30 Days to Family
  - Short-term intervention to help connect children with relatives and kin, with the goal of identifying potential placement options and supports
  - Specifically searches for relatives and kin who will keep siblings together, preserve child's relationships with friends and supportive adults, and maintain children in their schools of origin.

Annie Malone Children and Family Services

5503 Page Blvd, St. Louis, MO 63112

Phone: 314-531-0120

- Crisis Care and Emergency Placement:
  - 24 hr care to youth from birth-18 including emergency shelter, clothing, food, educational support, conflict management, emergency medical attention, counseling referrals, child abuse & neglect prevention
- Community Based Parenting Program
  - Offered to parents and families struggling with youth placed in their home
  - Provides intensive in-home services, individual and group-based Triple P Parenting Classes, Children's Division Supervised Visitations, therapeutic crisis intervention to assist in reunification process
- SAFER Program - Intensive Outpatient Program
  - Treatment service for youth 12-18 struggling with problematic substance use
  - Youth are provided with immediate access to mental and sexual health services, case management, and substance use cessation curriculum

Cornerstones of Care

1750 S. Brentwood Blvd #205 St. Louis, MO 63144

Phone: 314-881-0350

- Traditional Treatment Foster Care
  - Provides services to enhance coping skills in youth who have faced extreme trauma in a specialized licensed foster home
- Relative Treatment Foster Care
  - Individualized services for youth and caregivers to assist in maintaining home placement
- Transition Services
  - Services provided to support a youth's successful transition to permanency, in a family home or community setting
  - Includes housing, case management, and resource allocation tailored to youth's needs
- Intensive Family Reunification Services
  - Designed for Missouri families who have had children removed from their home, helping identify steps and actions needed to safely reunify children with their parents

References

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