# Addressing Trauma in the Child Welfare System

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# Presentation Overview

- Definition of trauma-informed child welfare system
- Review of traumatic stress
  - Impact on children, staff, system
- Information about resources available through the National Child Traumatic Stress Network
- Existing efforts around trauma-informed practice

# A Trauma-Informed Child Welfare System …

- Understands the potential impact of traumatic stress on children served by the child welfare system
- Understands how the system can either help mitigate the impact of trauma or inadvertently add new traumatic experiences
- Understands the potential impact of the current and past trauma on the families with whom we interact
- Understands how adult trauma may interfere with caregivers' ability to care for and support their children
- Understands how to promote factors related to child and family resilience

# A Trauma-Informed Child Welfare System…

- Understands the impact of secondary trauma on the child-serving workforce
- Understands that trauma has shaped the culture of child welfare the same way trauma shapes the world view of victims
- Understands that a traumatized system will struggle with identifying clients' past trauma or mitigating/ preventing future trauma
- Has the capacity to translate trauma-related knowledge into meaningful action, policy and practice changes

# What Is Child Traumatic Stress?

- Child traumatic stress refers to the *physical and emotional responses* of a child to events that threaten the life or physical integrity of the child or of someone critically important to the child (such as a parent or sibling)
- Traumatic events overwhelm a child's capacity to cope and elicit feelings of terror, powerlessness, and out-of-control physiological arousal
- Distinction between child traumatic stress and PTSD

# Traumatic Stress Symptoms

- Re-experiencing
  - nightmares, triggers
- Avoidance
  - Efforts to avoid reminders, numbing, detachment, withdrawal
- Arousal
  - Hypervigilance, trouble concentrating, quick to anger

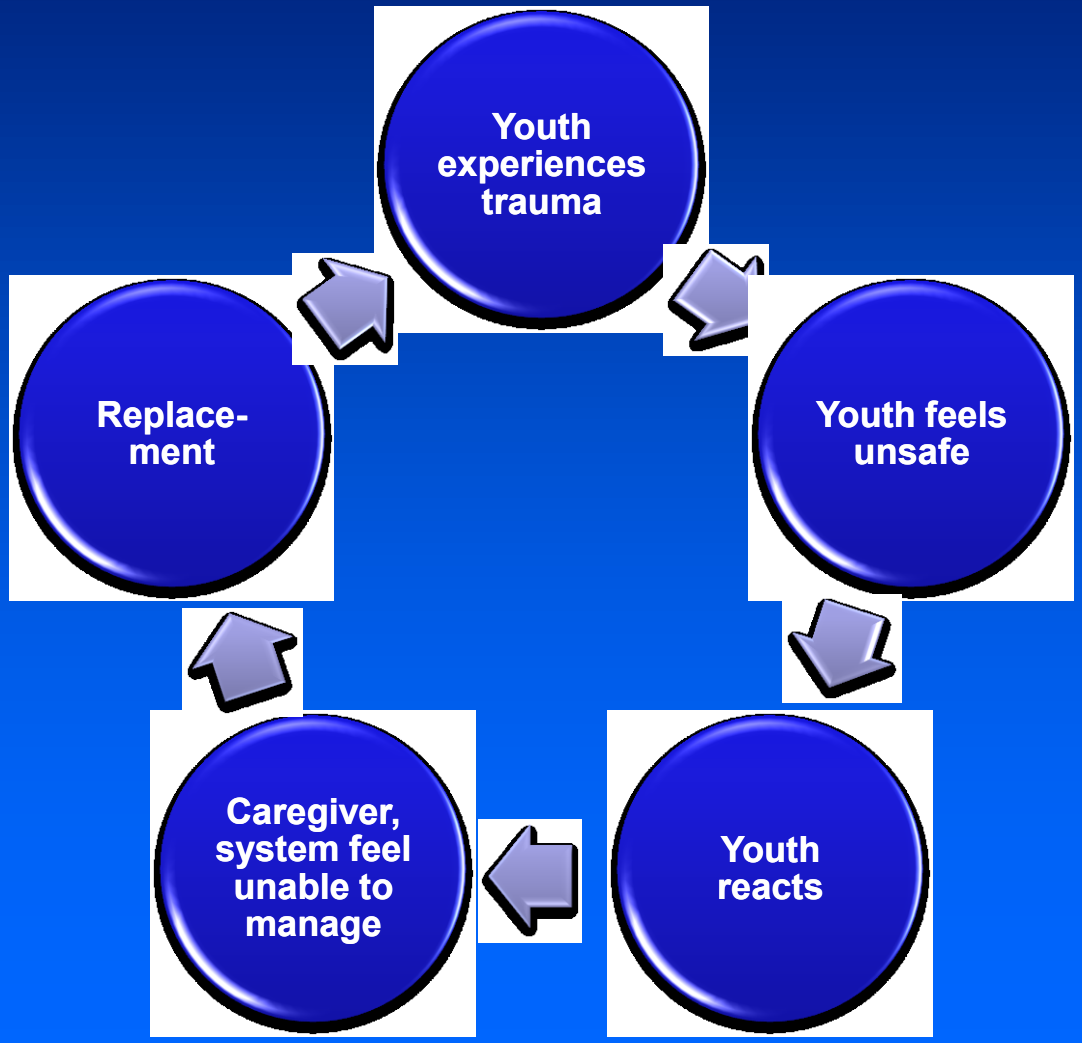
# Impact of Child Traumatic Stress

- Trauma is cumulative - one insult adds upon the last
- Traumatic events may affect a child's
  - Brain development
  - Sense of personal safety
  - Ability to trust others
  - Sense of the future
  - Behavior and social relationships
  - Effectiveness in navigating life changes
  - Educational performance and capacity to learn

# Response to Child Traumatic Stress

- Trauma can be mediated by numerous factors, including the response of caregivers and other adults
- Families impacted by intergenerational trauma may have challenges protecting children from trauma and/or responding effectively to a traumatic experience

# Impact of Trauma Among Children in Foster Care



# Traumas Experienced by Child Welfare-Involved Families

- 92% of mothers receiving NYC-based preventive services had experienced at least 1 type of traumatic event (N=127, M = 2.6)
  - 19% reported 5+ categories of traumatic events
  - DV most common "index" trauma
  - 35% felt that trauma symptoms affected their parenting or their relationship with their child
- Parent-report indicates 92% of children experienced at least 1 prior trauma (M = 4.8)
  - DV exposure most common trauma (54%)
  - 47% had been separated from caregiver
  - 45% witness/learned of arrest of family member

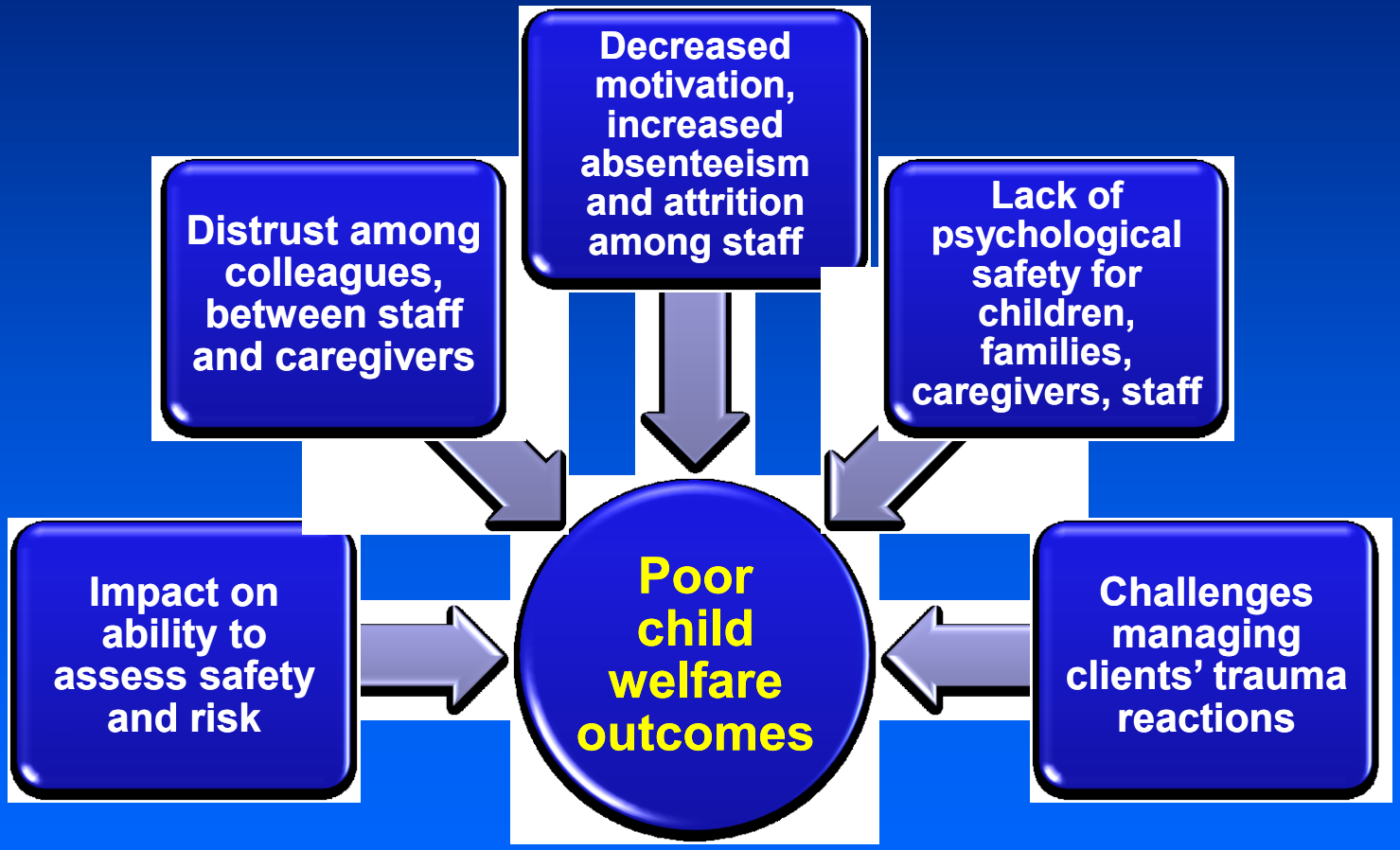
# Secondary Traumatic Stress (STS)

- Secondary trauma results from exposure to trauma experienced by others, often in a workplace context
- Secondary trauma symptoms are often indistinguishable from those experienced directly as a response to trauma
- Child welfare staff are particularly at risk of experiencing STS because of the nature of their clients' experiences and the vulnerability of their clients
- Child welfare staff are also at risk for experiencing primary trauma

# Impact of Trauma Among Child Welfare Staff

| Cognitive effects | Social impact | Emotional impact | Physical impact |
|---|---|---|---|
| • Negative bias, pessimism<br>• All-or-nothing thinking<br>• Loss of perspective and critical thinking skills<br>• Threat focus – see clients, peers, supervisor as enemy<br>• Decreased self-monitoring | • Reduction in collaboration<br>• Withdrawal and loss of social support<br>• Factionalism | • Helplessness<br>• Hopelessness<br>• Feeling overwhelmed | • Headaches<br>• Tense muscles<br>• Stomachaches<br>• Fatigue/sleep difficulties |

# System-Level Impact and Outcomes



# Creating System Buy-In

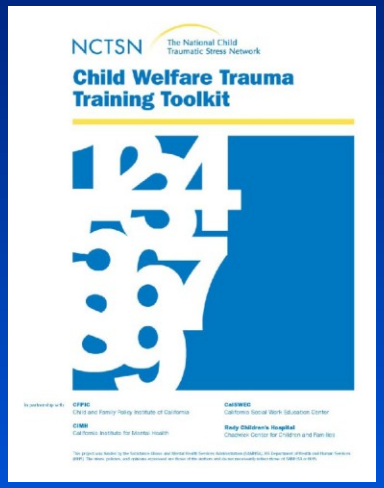
- Identify links between trauma and key child welfare system outcomes/concerns:
  - Staff performance, attrition
  - Decreased child maltreatment
  - Placement stability
  - Successful reunification
  - Foster parent retention
  - Successful adoptions

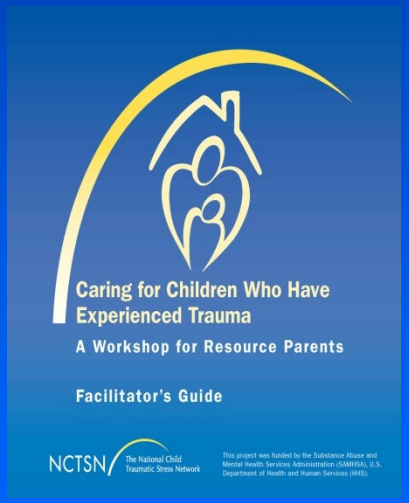
# National Child Traumatic Stress Network

- The mission of the National Child Traumatic Stress Network (NCTSN) is to raise the standard of care and improve access to services for traumatized children, their families and communities throughout the United States
- Information and resources are available through www.nctsn.org and learn.nctsn.org

# NCTSN Child Welfare Committee

- Helping Children in the Child Welfare System Heal from Trauma: A Systems Integration Approach (2005)
- Child Welfare Trauma Training Toolkit (2008, currently being revised)
- Caring for Children Who Have Experienced Trauma: A Workshop for Resource Parents (2010)
- Sponsoring a Breakthrough Series Collaborative focused on foster care placement stability (2010-2012)
- Fact sheets on birth parent trauma (2011)



# Trauma-Informed Child Welfare Practice Breakthrough Series Collaborative

- Sponsored by the National Center for Child Traumatic Stress with funding from SAMHSA
- Includes 9 sites from across the country (CO, FL, MA, NC, NH, OK, TX, Los Angeles and San Diego)
- Public child welfare system is lead, but the team is a partnership between child welfare jurisdictions, partner mental health/trauma sites, and family representatives (youth, parents, foster parents)

# BSC Essential Elements

- Knowledge Building and Developing Practice
- Trauma-Informed Mental Health Assessment
- Case Planning and Management
- Externally Delivered Trauma-Informed Services
- Child Welfare Systems, Cross-System Partnerships, and System Collaboration

# Good Practice → Trauma-Informed Practice

- Staff and stakeholder preparation
- Foster parent preparation and support
- Initial foster care placement
- Developing family service plan
- Providing services to child(ren) and parent
- Visitation
- Planning for reunification

# BSC Small Tests of Change – Examples

- **Knowledge-Building and Developing Practice:**
  - Increase resource parents' knowledge of the impact of trauma on children *(NCTSN Resource Parent Curriculum)*
  - Increase child welfare staff's knowledge of the impact of trauma on children *(NCTSN Child Welfare Trauma Training Toolkit)*
  - Increase child welfare staff's knowledge of and ability to manage secondary traumatic stress
- **Trauma-Informed Mental Health Assessment:**
  - Identification of children in foster care requiring a trauma-informed mental health assessment
- **Case Planning and Management:**
  - Improved communication and collaboration between birth parent and foster parent from beginning of placement
  - Identify information needed by the foster parent to facilitate a collaborative and trauma-informed placement

# BSC Findings To-Date

- Increased staff, foster parent, stakeholder training
  - Increased awareness and recognition of trauma
  - Increased participation in treatment planning, trauma treatment, ability to manage behavior
- Increased trauma screening, children identified as needing trauma treatment
  - Availability of evidence-based treatment still limited in areas
- Increase in information-sharing between birth and foster parents
- Decrease in placement moves

# ACS-NYU Children's Trauma Institute

- Resilience Alliance
  - Addressing secondary traumatic stress among child protective staff
  - Skills-focused groups
  - Focus on optimism, mastery and collaboration
- Safe Mothers, Safe Children
  - Addressing PTSD among mothers receiving child welfare services
  - Focus on link between mother's trauma and safe parenting

# Resilience Alliance

- Decrease stress on the worker through enhancing resilience skills and increasing social support
- Skills-focused intervention:
  - Optimism
    - Anticipating the best possible outcome and the ability to reframe challenging situations in positive ways
  - Mastery
    - Skills to perform one's job effectively
    - Ability to regulate negative emotion, engage in self-care while doing one's job
  - Collaborative Alliance
    - Workers, supervisors and clients working together toward a common goal

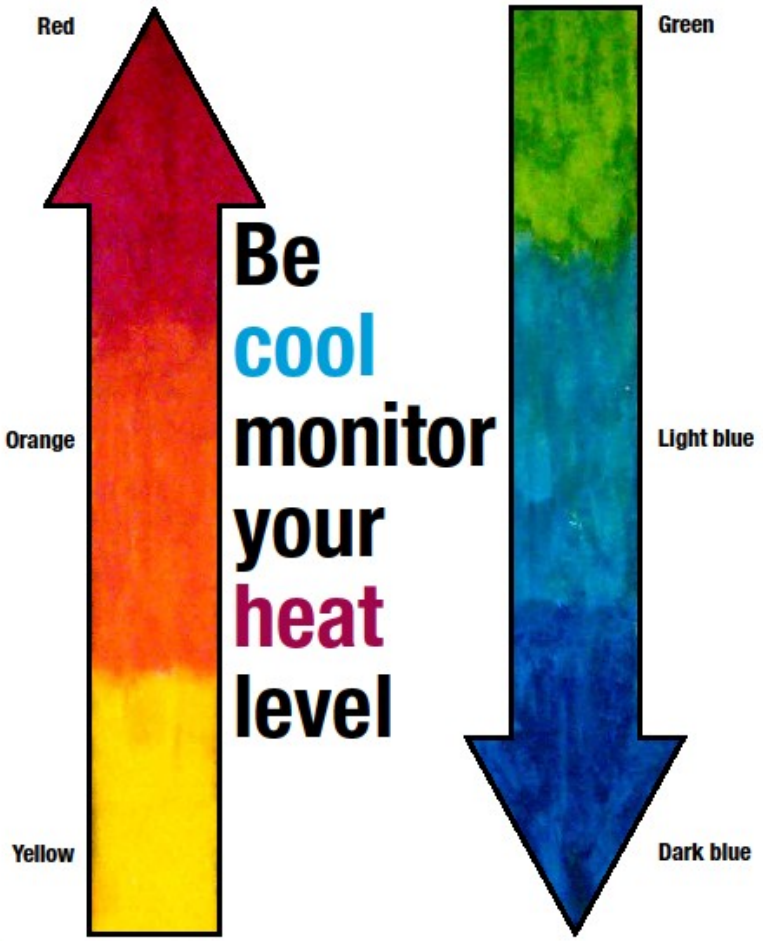
# Resilience Alliance Structure

- Weekly groups with child protective staff, supervisors, managers
  - CPS alone, by units
  - CPS/Supervisor units
  - Child Protective Manager and his/her CPS/Supervisor units
  - CPSs and Supervisors/Managers separately
- Focus on learning resilience concepts, applying skills to workplace experiences

# Resilience Alliance – Reactivity

- Reactivity describes our emotional and physical reactions to events that take place in our environment
- When we perceive our environment negatively, we are more likely to be aggressive, hyper-vigilant and over-reactive
- How people present to others can differ from how they are feeling internally – you shouldn't assume you know how someone is feeling without asking them

# Reactivity Color Zone




HANDOUT 8

# Characteristics of Reactivity — Level of Heat

| | HIGH | LOW |
|---|---|---|
| Body tension/arousal | | |
| Emotions | | |
| Thoughts | | |
| Speaking style | | |
| Facial expressions | | |
| Others | | |

HANDOUT 9

# Practicing Self-Care in the Workplace

HANDOUT 24

*for* **ALL**

**Select one self-care activity to practice in the upcoming week.**

*for the* **INDIVIDUAL**

chosen self-care activity:

_____

This is how I felt before practicing it:

_____

This is how I felt after practicing it:

_____

*for the* **SUPERVISORS**

chosen self-care activity:

_____

This is how the unit's members felt before practicing it:

_____

This is how the unit's members felt after practicing it:

_____

*for the* **MANAGERS**

chosen self-care activity:

_____

This is how the managerial area's members felt before practicing it:

_____

This is how the managerial area's members felt after practicing it:

_____

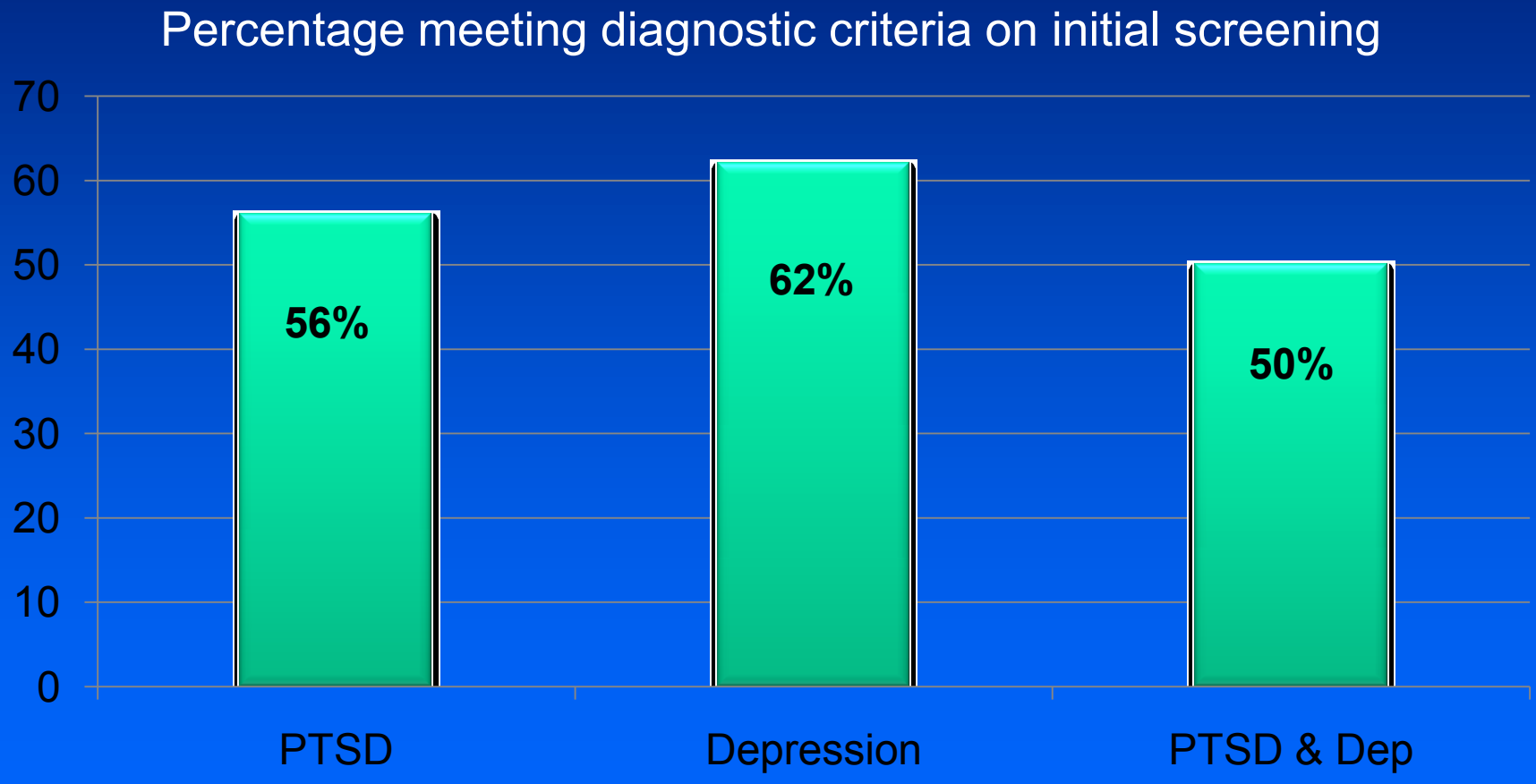
# Program Evaluation

- Positive impacts on:
  - Resilience
  - Optimism
  - Job satisfaction
  - Reactivity to stressful events
  - Burnout
  - Attrition

# Safe Mothers, Safe Children Project

- Partnership with 5 child welfare preventive service agencies
- Project components:
  - Screening
    - Preventive agency case planners screen mothers, with support and consultation from SMSC clinician
  - Assessment
    - Clinician assesses mothers with PTSD symptoms
  - Intervention
    - Parenting STAIR (Skills Training in Affective and Interpersonal Regulation)
  - Training
    - 12-session curriculum developed for preventive agency staff

# Trauma-related symptoms in mothers (N=163)

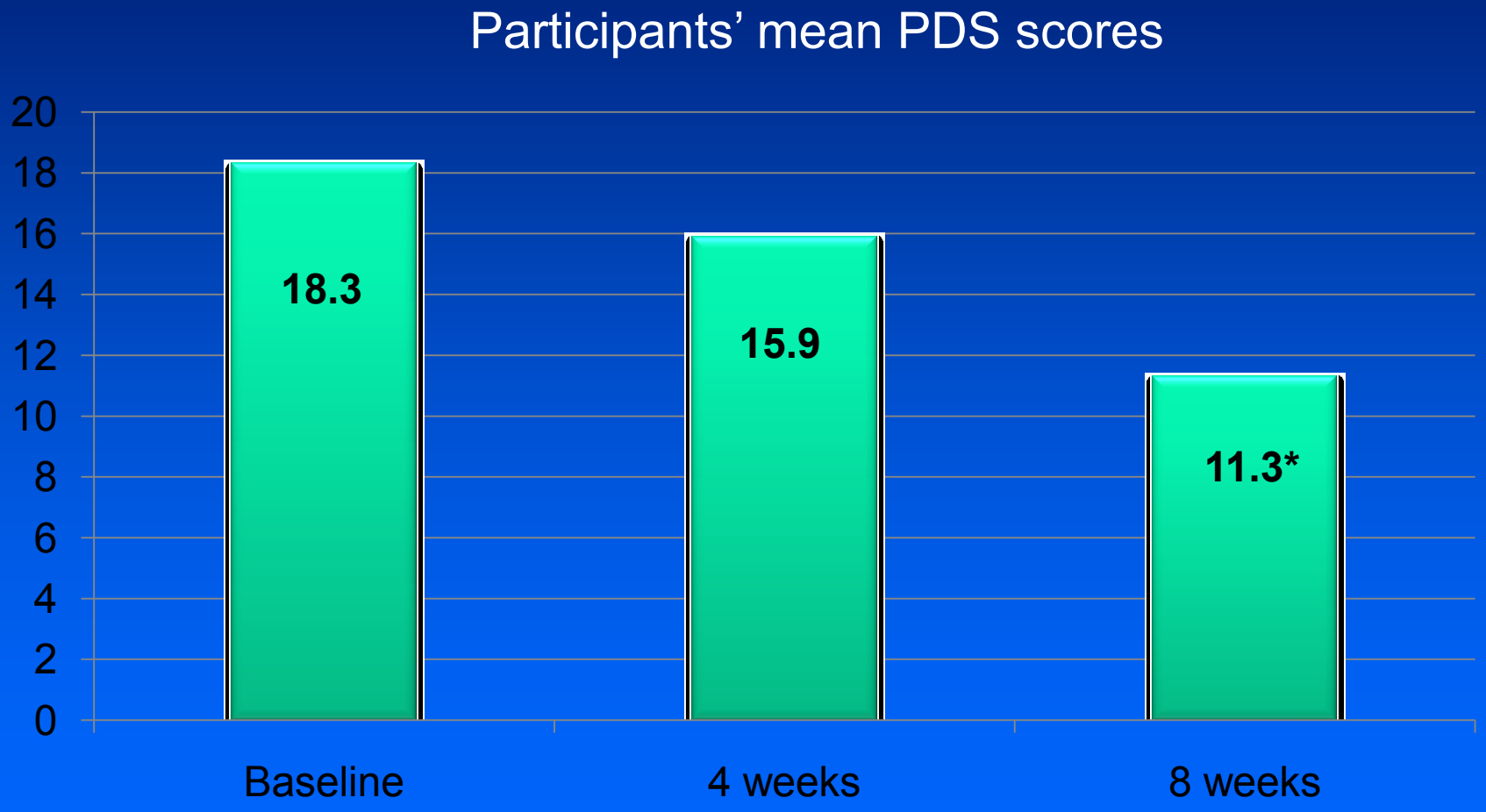


# Parenting STAIR – Example

**Distress tolerance exercise:**

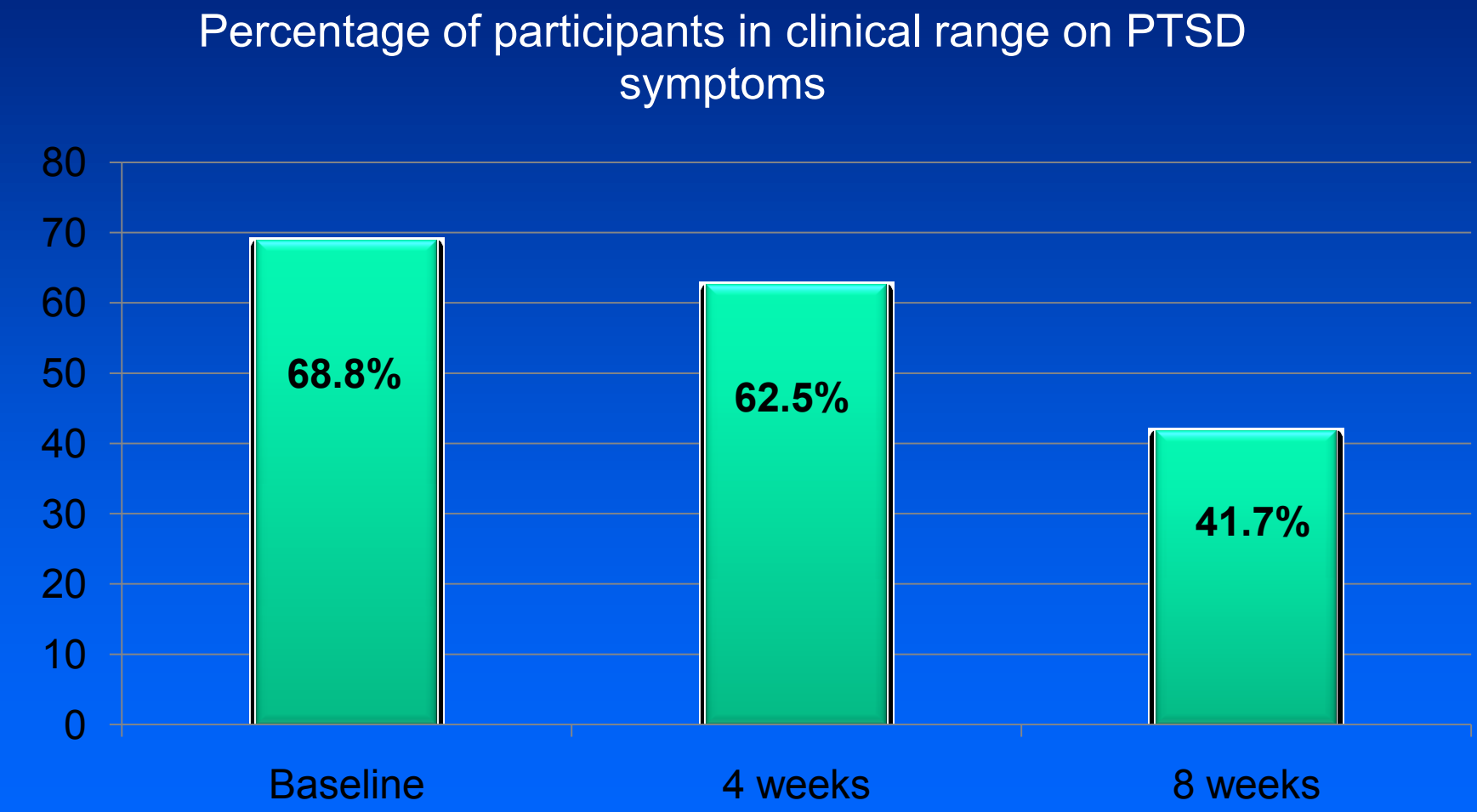
- **Psychoeducation around PTSD and distress tolerance (from STAIR)**
- **Ask client to identify a time when she was distressed by her child's behavior (e.g., throwing a tantrum in grocery store)**
  - **Was she able to tolerate the distress or not?**
- **Role-play resolving the situation by tolerating the distress vs. not tolerating the distress**
  - **How were her emotions/actions different?**
  - **What was the child's reaction each time?**

# Improvement in Maternal Trauma Symptoms




**4 week, N=16, 8-week, N=11**
*** Not in clinical range**

# Improvement in Maternal Trauma Symptoms




**4 week, N=16, 8-week, N=11**

# Federal Efforts

- 5-year ACYF grant to develop trauma-informed and trauma-focused child welfare practice
  - Increasing availability of trauma-informed mental health services within child welfare systems
  - Increasing system's understanding and integration of "trauma lens"
  - Connection to NCTSN

# Questions and Answers

# Contact information:

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