TOPIC 1: The Essential Elements of Trauma Informed Parenting

2014

(From the: Trauma Informed Caregiving for Resource Families Series)

CREDITS:
Material originally used in the ACRF Rural Teleconference Series “Trauma Informed Caregiving for Resource Families and taken from the Participant Handbook developed by the National Child Traumatic Stress Network Curriculum for Resource Families

The following information packet contains several articles on the above topic. If you wish to receive training credit for reading this packet, please fill out the “Information Packet Questionnaire” at the back of this packet. Return the questionnaire to the Alaska Center for Resource Families for 1.0 hour of training credit. The articles are yours to keep for further reference.

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The Alaska Center for Resource Families, a project of Northwest Resource Associates, is under contract with the State of Alaska Office of Children’s Services to provide training and information to foster parents statewide.
The Essential Elements of Trauma-Informed Parenting

1. Recognize the impact trauma has had on your child.

Children who have survived trauma can present incredible challenges. But when you view children's behaviors and reactions through the "lens" of their traumatic experience, many of these behaviors and reactions begin to make sense.

Using an understanding of trauma as a foundation, you can work with other members of your child's team to come up with effective strategies to address challenging behaviors and help your child develop new, more positive coping skills.

2. Help your child to feel safe.

Safety is critical for children who have experienced trauma. Many have not felt safe or protected in their own homes, and are on a constant state of alert for the next threat to their well-being.

Children who been through trauma may be physically safe and still not feel psychologically safe. By keeping your child’s trauma history in mind, you can establish an environment that is physically safe and work with your child to understand what it will take to create psychological safety.

3. Help your child to understand and manage overwhelming emotions.

Trauma can cause such intense fear, anger, shame, and helplessness that children are overwhelmed by their feelings. In addition, trauma can derail development so that children fail to learn how to identify, express, or manage their emotional states.

For example, babies learn to regulate and tolerate their shifting feelings by interacting with caring adults. Older children who did not develop these skills during infancy may seem more like babies emotionally. By providing calm, consistent, and loving care, you can set an example for your children and teach them how to define, express, and manage their emotions.

4. Help your child to understand and manage difficult behaviors.

Overwhelming emotion can have a very negative impact on children's behavior, particularly if they cannot make the connection between feelings and behaviors. Because trauma can derail development, children who have experienced trauma may display problem behaviors more typical of younger children.

For example, during the school-age years, children learn how to think before acting. Adolescents who never learned this skill may be especially impulsive and apt to get into trouble. As a trauma-informed resource parent, you can help your children to understand the links between their thoughts, feelings, and behaviors, and to take control of their behavioral responses.
5. Respect and support the positive, stable, and enduring relationships in the life of your child.

Children learn who they are and what the world is like through the connections they make, including relationships with other people. These connections help children define themselves and their place in the world. Positive, stable relationships play a vital role in helping children heal from trauma.

Children who have been abused or neglected often have insecure attachments to other people. Nevertheless, they may cling to these attachments, which are disrupted or even destroyed when they come into care.

As a trauma-informed resource parent, you can help your child to hold on to what was good about these connections, reshape them, make new meaning from them, and build new, healthier relationships with you and others as well.

6. Help your child to develop a strength-based understanding of his or her life story.

In order to heal from trauma, children need to develop a strong sense of self, to put their trauma histories in perspective, and to recognize that they are worthwhile and valued individuals.

Unfortunately, many children who have experienced trauma live by an unwritten rule of “Don’t tell anyone anything.” They may believe that what happened to them is somehow their fault because they are bad, or damaged, or did something wrong.

You can help children to overcome these beliefs by being a safe listener when children share, working with children to build bridges across the disruptions in their lives, and helping children to develop a strength-based understanding of their life stories.

7. Be an advocate for your child.

Trauma can affect so many aspects of a child’s life that it takes a team of people and agencies to facilitate recovery. As the one most intimately and consistently connected with your child, you are a critical part of this team. As a trauma-informed resource parent, you can help ensure that efforts are coordinated, and help others to view your children through a trauma lens.

8. Promote and support trauma-focused assessment and treatment for your child.

Children who have experienced trauma often need specialized assessment and treatment in order to heal. The effects of trauma may be misunderstood or even misdiagnosed by clinicians who are not trauma experts. For example, the nervousness and inability to pay attention that comes with trauma may be misdiagnosed as ADHD, or moodiness and irritability may be misdiagnosed as bipolar disorder. Fortunately, there are trauma-focused treatments whose effectiveness has been established. You can use your understanding of trauma and its effects to advocate for the appropriate treatment for your child.

9. Take care of yourself.

Caring for children who have experienced trauma can be very difficult, and can leave resource families feeling drained and exhausted. In order to be effective, it is important to also take care of ourselves, and take action to get the support we need when caring for traumatized children.
Myths to Avoid

- My love should be enough to erase the effects of everything bad that happened before.
- My child should be grateful and love me as much as I love him/her.
- My child shouldn’t love or feel loyal to an abusive parent.
- It’s better to just move on, forget, and not talk about past painful experiences.
Child Traumatic Stress: A Primer for Resource Parents

What Is Traumatic Stress?

By the time most children enter the foster care system they have already been exposed to a wide range of painful and distressing experiences. Although all of these experiences are stressful, experiences are considered traumatic when they threaten the life or physical integrity of the child or of someone critically important to the child (such as a parent, grandparent, or sibling). Traumatic events lead to intense physical and emotional reactions, including:

- An overwhelming sense of terror, helplessness, and horror
- Automatic physical responses such as rapid heart rate, trembling, dizziness, or loss of bladder or bowel control

Types of Traumatic Stress: Acute Trauma

A single traumatic event that lasts for a limited period of time is called an acute trauma. A natural disaster, dog bite, or motor vehicle accident are all examples of acute traumas. Over the course of even a brief traumatic event, a child may go through a variety of complicated sensations, thoughts, feelings, and physical responses that change from moment to moment as the child appraises the danger faced and the prospects of safety. As the event unfolds, the child's pounding heart, out-of-control emotions, loss of bladder control, and other physical reactions are frightening in themselves and contribute to his or her sense of being overwhelmed.

Types of Traumatic Stress: Chronic Trauma

Chronic trauma occurs when a child experiences many traumatic events, often over a long period of time. Chronic trauma may refer to multiple and varied events—such as a child who is exposed to domestic violence, is involved in a serious car accident, and then becomes a victim of community violence—or recurrent events of the same kind, such as physical or sexual abuse.

Even in cases of chronic trauma, there are often particular events or moments within those events that stand out as particularly horrifying. For example, one little boy reported “I keep thinking about the night Mommy was so drunk I was sure she was going to kill my sister.”

What about neglect?

Neglect is defined as the failure to provide for a child's basic physical, medical, educational, and emotional needs. Since neglect results from "omissions" in care, rather than "acts of commission" (such as physical and sexual abuse), it might seem less traumatic. However, for an infant or very young child who is completely dependent on adults for care, being left alone in a crib, in a wet, dirty diaper, suffering from the pain of hunger and exhausted from hours of crying, neglect feels like a very real threat to survival.

For older children, not having proper care, attention, and supervision often opens the door to other traumatic events, such as accidents, sexual abuse, and community violence. Neglect can make children feel abandoned and worthless, and reduce their ability to recover from traumatic events.
Chronic trauma may result in any or all of the symptoms of acute trauma, but these problems may be more severe and more long lasting. The effects of trauma are often cumulative, as each event serves to remind the child of prior trauma and reinforce its negative impact. A child exposed to a series of traumas may become more overwhelmed by each subsequent event and more convinced that the world is not a safe place. Over time, a child who has felt overwhelmed over and over again may become more sensitive and less able to tolerate ordinary everyday stress.

How Do Children Respond to Trauma?

Every child reacts to trauma differently. What is very distressing for one child may be less so for another. A child's response to a traumatic event will vary depending on factors such as:

- The child's age and developmental stage
- The child's perception of the danger faced
- Whether the child was the victim or a witness
- The child's relationship to the victim or perpetrator
- The child's past experience with trauma
- The adversities the child faces in the aftermath of the trauma
- The presence/availability of adults who can offer help and protection

Children who have been through trauma may show a range of traumatic stress reactions. These are grouped into three categories.

- **Hyperarousal**: The child is jumpy, nervous, easily startled.
- **Reexperiencing**: Images, sensations, or memories of the traumatic event come uncontrollably into the child's mind. At its most extreme, reexperiencing may make a child feel back in the trauma.
- **Avoidance and withdrawal**: The child feels numb, frozen, shut down, or cut off from normal life and other people. The child may withdraw from friends and formerly pleasurable activities. Some children, usually those who have been abused, disconnect or withdraw internally during a traumatic event. They feel detached and separate from their bodies, and may even lose track of time and space. Children who have learned to dissociate to protect themselves may then dissociate during any stressful or emotional event.

Traumatic stress reactions can lead to a range of troubling, confusing, and sometimes alarming behaviors and emotional responses in children. They may have:

- Trouble learning, concentrating, or taking in new information
- Problems going to sleep, staying asleep, or nightmares
- Emotional instability; being moody one minute and cheerful the next, or suddenly becoming angry or aggressive
When Trauma Is Caused by Loved Ones: Complex Trauma

Some trauma experts use the term complex trauma to describe a specific kind of chronic trauma and its effects on children. Complex trauma refers to multiple traumatic events that begin at a very early age and are caused by the actions—or inactions—of adults who should have been caring for and protecting the child. When trauma begins early and is caused by the very people whom the child relies on for love and protection, it can have profound effects on a child’s healthy physical and psychological development. Children who have experienced complex trauma have had to cope with chronically overwhelming and unmanageable stresses almost entirely on their own. As a result, these children often:

- Have difficulty regulating their feelings and emotions
- Find it hard to feel safe
- Have difficulty forming trusting relationships
- Find it hard to navigate and adjust to life’s changes
- Display extreme emotional and physical responses to stress

Transcending Trauma: Resilience and the Role of Resource Parents

The ability to recover from traumatic events is called resilience. In general, children who feel safe, capable, and lovable are better able to “bounce back” from traumatic events.

There are many factors in a child’s life that can promote resilience and help a child see the world as manageable, understandable, and meaningful. Some of the factors that can increase resilience include:

- A strong, supportive relationship with a competent and caring adult
- A connection with a positive role model or mentor
- Recognition and nurturance of their strengths and abilities
- Some sense of control over their own lives
- Membership in a community larger than themselves, whether their neighborhood, faith-based group, scout troop, extended family, or a social cause

Regardless of the child’s age or the types of trauma experienced, healing is possible. With nurture and support, children who have been through trauma can regain trust, confidence, and hope. Resource parents are critical in helping children in their care to build resilience and overcome the emotional and behavioral effects of child traumatic stress. By creating a structured, predictable environment, listening to the child’s story at the child’s pace, and working with professionals trained in trauma and its treatment, resource parents can make all the difference.
The Invisible Suitcase: Meeting the Needs of Traumatized Children

The Invisible Suitcase

Children who enter the foster care system typically arrive with at least a few personal belongings: clothes, toys, pictures, etc. But many also arrive with another piece of baggage, one that they are not even aware they have: an “invisible suitcase” filled with the beliefs they have about themselves, the people who care for them, and the world in general.

For children who have experienced trauma—particularly the abuse and neglect that leads to foster care—the invisible suitcase is often filled with overwhelming negative beliefs and expectations. Beliefs not only about themselves . . .

- I am worthless.
- I am always in danger of being hurt or overwhelmed.
- I am powerless.

But also about you as a caregiver . . .

- You are unresponsive.
- You are unreliable.
- You are, or will be, threatening, dangerous, and rejecting.

You didn’t create the invisible suitcase, and the beliefs inside it aren’t about you personally. But understanding its contents is critical to helping your child overcome the effects of trauma and establish healthy relationships.

The Invisible Suitcase and Behavior

The negative beliefs and expectations that fill the invisible suitcase permeate every aspect of a child’s life. Children who have been through trauma take their invisible suitcases with them to school, into the community, everywhere they go. They have learned through painful experience that it is not safe to trust or believe in others, and that it is best not to give relationships a chance.

As a result, children who have experienced trauma often exhibit extremely challenging behaviors and reactions that can be overwhelming for resource parents. These problems may include aggression, outbursts of anger, trouble sleeping, and difficulty concentrating. Very often, the behavior problems that are the most difficult to handle—those that may even threaten the child’s placement in your home—come from the invisible suitcase and its impact on relationships. One way of understanding why this happens is the concept of reenactment.

Reenactment is the habit of recreating old relationships with new people. Reenactments are behaviors that evoke in caregivers some of the same reactions that traumatized children experienced with other adults, and so lead to familiar—albeit negative—interactions. Just as
traumatized children's sense of themselves and others is often negative and hopeless, their reenactment behaviors can cause the new adults in their lives to feel negative and hopeless about the child.

**Why do children reenact?**

Children who engage in reenactments are not consciously choosing to repeat painful or negative relationships. The behavior patterns children exhibit during reenactments have become ingrained over time because they:

- Are familiar and helped the child survive in other relationships
- "Prove" the negative beliefs in the invisible suitcase by provoking the same reactions the child experienced in the past *(a predictable world, even if negative, may feel safer than an unpredictable one)*
- Help the child vent frustration, anger, and anxiety
- Give the child a sense of mastery over the old traumas

Many of the behaviors that are most challenging for resource parents are strategies that in the past may have helped the child survive in the presence of abusive or neglectful caregivers. Unfortunately, these once-useful strategies can undermine the development of healthy relationships with new people and only reinforce the negative messages contained in the invisible suitcase.

**What Resource Parents Can Do**

**Remember the suitcase**

Keep in mind that the children placed in your home are likely to use the strategies they learned in situations of abuse and neglect. Because of their negative beliefs, children with an invisible suitcase have learned to elicit adult involvement through acting out and problem behavior. These behaviors may evoke intense emotions in you, and you may feel pushed in ways you never expected. Some common reactions in resource parents include:

- Urges to reject the child
- Abusive impulses towards the child
- Emotional withdrawal and depression
- Feelings of incompetence/helplessness
- Feeling like a bad parent

This can lead to a vicious cycle in which the child requires more and more of your attention and involvement, but the relationship is increasingly strained by the frustration and anger both you and the child now feel. If left unchecked, this cycle can lead to still more negative interactions, damaged relationships, and confirmation of all the child's negative beliefs about himself or herself and others. In some cases, placements are ended. And, the suitcase just gets heavier.
Provide disconfirming experiences

Preventing the vicious cycle of negative interactions requires patience and self-awareness. Most of all, it requires a concerted effort to respond to the child in ways that challenge the invisible suitcase and provide the child with new, positive messages—messages that tell the child:

- You are worthwhile and wanted.
- You are safe.
- You are capable.

And messages that say you, as a caregiver:

- Are available and won’t reject the child
- Are responsive and not abusive
- Will protect the child from danger
- Will listen and understand

This does not mean giving children a free pass on their negative behaviors. As a parent, you must still hold children accountable, give consequences, and set expectations. But with the invisible suitcase in mind, you can balance correction with praise and deliver consequences without the negative emotions that may be triggered by the child’s reenactments:

- Praise even the simplest positive or neutral behaviors. Provide at least six instances of warm, sincere praise for each instance of correction.
- Stay calm and dispassionate when correcting the child. Use as few words as possible and use a soft, matter-of-fact tone of voice.
- Be aware of your own emotional response to the child’s behavior. If you cannot respond in a calm, unemotional fashion, step away until you can.
- Don’t be afraid to repeat corrections (and praise) as needed. Learning new strategies and beliefs takes time.

Establish a dialog

The strategies that maltreated children develop to get their needs met may be brilliant and creative, but too often are personally costly. They need to learn that there is a better way. Children need to learn that they can talk about the underlying feelings and beliefs contained in their invisible suitcase. They need to understand that you can tolerate these expressions without the common reactions they have come to expect from adults: rejection, abuse, abandonment. Help children learn words to describe their emotions and encourage them to express their feelings. When the contents of the invisible suitcase have been unpacked and examined, reenactments and negative cycles are less likely to occur.
Module 2: Trauma 101

What does the word "trauma" mean?

A traumatic experience . . .

- Threatens the life or physical integrity of a child or of someone important to that child (parent, grandparent, sibling)
- Causes an overwhelming sense of terror, helplessness, and horror
- Produces intense physical effects such as pounding heart, rapid breathing, trembling, dizziness, or loss of bladder or bowel control
Types of Trauma

Acute trauma:
A single event that lasts for a short time

(Continued)

Types of Trauma
(Continued)

Chronic trauma:
The experience of multiple traumatic events

(Continued)

Types of Trauma:
What About Neglect?

- Failure to provide for a child’s basic needs
- Perceived as trauma by an infant or young child completely dependent on adults for care
- Opens the door to other traumatic events
- May reduce a child's ability to recover from trauma
When Trauma Is Caused by Loved Ones

The term complex trauma is used to describe a specific kind of chronic trauma and its effects on children:

- Multiple traumatic events that begin at a very young age
- Caused by adults who should have been caring for and protecting the child

My Child's Traumas (Group Activity)

- Acute
- Chronic
- Complex
- Neglect
- What don't I know?

How Children Respond to Trauma

Long-term trauma can interfere with healthy development and affect a child's:

- Ability to trust others
- Sense of personal safety
- Ability to manage emotions
- Ability to navigate and adjust to life's changes
- Physical and emotional responses to stress

(Continued)
A child's reactions to trauma will vary depending on:
- Age and developmental stage
- Temperament
- Perception of the danger faced
- Trauma history (cumulative effects)
- Adversities faced following the trauma
- Availability of adults who can offer help, reassurance, and protection

Hyperarousal:
- Nervousness
- Jumpiness
- Quickness to startle

Reexperiencing:
- Intrusive images, sensations, dreams
- Intrusive memories of the traumatic event or events
How Children Respond to Trauma (Continued)

Avoidance and withdrawal:
- Feeling numb, shutdown, or separated from normal life
- Pulling away from activities and relationships
- Avoiding things that prompt memories of the trauma

What You Might See: Reactions to Trauma Reminders

Trauma reminders:
Things, events, situations, places, sensations, and even people that a child connects with a traumatic event

Reactions to Trauma Reminders (Continued)

- Reexperiencing
- Withdrawal
- Disassociation
I don’t think there was a time when I wasn’t abused as a child. In order to survive the abuse, I made believe that the real me was separate from my body. That way, the abuse was happening not really to me, but just this skin I’m in.

—C. M.

What about Posttraumatic Stress Disorder?

Posttraumatic stress disorder (PTSD) is diagnosed when:

- A person displays severe traumatic stress reactions,
- The reactions persist for a long period of time, and
- The reactions get in the way of living a normal life.

What You Might See: Traumatic Stress Reactions

- Problems concentrating, learning, or taking in new information
- Difficulty going to sleep or staying asleep, nightmares
- Emotional instability, moody, sad, or angry and aggressive, etc.
- Age-inappropriate behaviors: reacting like a much younger child
What You Might See: Traumatic Play

When playing, young children who have been through traumatic events may:

- Repeat all or part of the traumatic event
- Take on the role of the abuser
- Try out different outcomes
- Get "stuck" on a particular moment or event

(Continued)

Traumatic Play (Continued)

Seek professional help if your child:

- Centers most play activities around traumatic events
- Becomes very upset during traumatic play
- Repeatedly plays the role of the abuser with dolls or stuffed animals or acts out abuse with other children
- Plays in a way that interferes with relationships with other children

What You Might See: Talking About Trauma

- Talking about certain events all the time
- Bringing up the topic seemingly "out of the blue"
- Being confused or mistaken about details
- Remembering only fragments of what happened
- Avoiding talk about anything remotely related to the traumatic events
Tips for Being a Fabulous Trauma-Informed Resource Parent

Be nurturing

Children who have experienced trauma need to be held, rocked, and cuddled. Be physical in caring for and loving them. Be aware that, for many of these children, touch in the past has been associated with pain, torture, or sexual abuse. In these cases, make sure you carefully monitor how they respond—be attuned to their responses and act accordingly.

In many ways, you are providing replacement experiences that should have taken place when they were much younger—but you are doing this when their brains are harder to modify and change. Therefore, they will need even more loving and nurturing experiences to help them develop and grow.

Be consistent

Children who have experienced trauma are often very sensitive to changes in schedules, transitions, surprises, chaotic social situations, changes in a therapist’s office, and in any new situation in general. Birthday parties, sleepovers, holidays, family trips, the start and end of the school year, etc., can all be scary and upsetting for them.

Be “boringly predictable.” Let children know about changes and transitions many days and even weeks ahead of time. Walk them to and through their new school building before school starts. Keep a large, visible calendar at home in a central location where they can easily see upcoming events. Review it weekly.

If children become anxious when given too much advance information (for example, planning for a visit with a parent at Human Services), scale back. Tune in to each child’s comfort zone about change and modify your plan accordingly.

Establish a dialog

Social interactions are an important part of parenting and of the child’s healing process.

One of the most important and pleasurable things to do is just stop, sit, and listen. When you are quiet and interactive with kids, you will find that they will begin to show you and tell you about what is really inside them. As simple as this sounds, it is one of the most difficult things for adults to do—to stop, quit worrying about the time or your next task, and really relax into the moment with a child. These children will sense that you are there just for them. They will feel that you care.

Play

All attachments begin with play. Activities that allow you to playfully interact with children are very important. These activities allow the opportunity for a child to be nurtured and begin the healing process.
Play with bubbles or clay or stuffed animals. Dig in the dirt or ride a bike. Just find a way to play with your child.

This will provide the child with an opportunity to be a child—which may be a very new experience!

Teach feelings

All feelings are okay to feel. Teach healthy ways to act when having feelings. Explore how other people may feel and how they show their feelings (development of empathy). Talk about how you and other family members express feelings.

When you sense that the child is clearly feeling something, wonder out loud about the feelings: “I wonder if you’re feeling sad that your mom didn’t come to visit” or “I wonder if you feel angry when I say “no.”

Try one of the many games designed to help kids identify and communicate feelings. Draw pictures of feeling faces together, or find pictures in magazines of different feelings. Use a digital camera and take pictures of each of you “putting on” different feeling faces, or practice making feeling faces in the mirror. Label and give words to different feelings and situations in which those feelings are common. Don’t forget to help the child pay attention to the physical part of their emotional reactions.

Model and teach appropriate behaviors

Children who have experienced trauma often do not know how to interact well with adults or other children. Model positive behaviors yourself, and realize that they are watching you to see how you will respond to different situations.

Become a “play-by-play announcer”: “I am going to the sink to wash my hands before dinner…. I take the soap and get my hands soapy, then…” They will see, hear, and imitate your coaching.

Do not assume they know how to play or how to share feelings. Help them practice skills in both areas.

Physical contact with children who have been traumatized can be problematic. They often don’t know when to hug; how close to stand; when to establish or break eye contact; or under what conditions it is acceptable to pick their nose, touch their genitals, or do grooming behaviors. They often initiate physical contact with strangers, which adults can interpret as affectionate—but it is not. Gently guide the child on how to interact differently and address the issue every time it occurs.

Help the child to self-regulate

Children need adults to help them learn to regulate and stay calm. Teach children that they are safe and protected, and that they don’t have to expect the worst. Provide calming, reassuring interactions. Help them to self-soothe and self-regulate.
Observe the child at different times during the day and in different situations, and be prepared for how the child will respond. Show parental "strength" and capacity to keep the child safe and calm during those difficult situations.

Don’t give a child more stimulation than he or she can handle—even fun activities. Find out what helps your child calm down, and make a plan for what to do when you’re not with him or her.

**Understand the behavior before imposing punishment or consequences**

The more you can learn about the impact of trauma on your child’s development, emotional responses, and behaviors, the more you will be able to develop useful behavioral and social interventions.

For example, when a child hoards food, this act should not be viewed as “stealing,” but as a common and predictable result of being deprived of food during early childhood.

Difficult or problem behaviors also may be the child’s way of “testing” your reactions, based on real past experiences.

Take time to give consequences if you need it. Think about the message you want to give your child, and create a consequence according to that insight. For example, giving a child a “time in” (rather than a “time out”) helps a child to “stop the action” without feeling rejected by having to leave the presence of the caregiver.

Avoid control battles/power struggles by providing the child with two acceptable choices whenever possible. Only give consequences that are enforceable. Take time to “re-attune” following consequences.

**Use emotions as a parenting tool**

Children who have experienced trauma need an abundance of warm, sincere praise when they’ve done something well, and clear, dispassionate consequences when they’ve misbehaved. Go for a 6:1 ratio of praise to correction (minimum), including positive comments to other adults.

**PRAISE** means:

- Positive attitude in body, voice, and facial expression
- Noticing the simplest positive or neutral behaviors and praising them

**DISPASSION** means:

- Fewer words
- Soft, firm voice
- Matter-of-fact tone of voice
- Recognizing your own reaction and not letting it bleed through
- Calm body, calm voice, and calm face
- Repetition, if necessary
Have realistic expectations

Children who have experienced trauma have much to overcome. Some will not overcome all of their problems. Others will make great strides. Keep in mind that they have been robbed of some, but not all, of their potential.

*Progress may be slow.* The slow progress can be frustrating, and many foster and adoptive parents will feel inadequate because all of the love, time, and effort they spend with their child may not seem to be having any effect. But it does. Don’t be hard on yourself. It is normal to feel swamped and overwhelmed at times when parenting with these challenges.

*Keep in mind that you are planting seeds. Remember to use your “magnifying glass” and “measuring spoons” to gauge progress.*

Take care of yourself

You cannot provide the consistent, predictable, enriching, and nurturing care a child needs if you are depleted. You will not be able to help if you are exhausted, depressed, angry, overwhelmed, or resentful.

*Rest.* Get support. Use respite care periodically to have some “adult time.”

*Nurture your own primary relationships* with your partner, own children, family, and friends. Have a hobby or take a class, get a massage, or have a regular night out.

Understand your needs for caring, compassion, and kindness from others.

*Maintain a support network* of others who know the work and the challenges involved. Maintain a strong, trusting relationship with a therapist or coach. Talk about feelings of despair, sadness, grief, or rage when they occur.

Remember to keep your sense of humor, to play, and to find joy in the world.

*Adapted from*

“How to Be a Fabulous Therapeutic Foster Parent in 10 Not-So-Easy Steps”
Jennifer Wilgocki, MS, LCSW and James G. Ven Den Brandt, LCSW, ACSW

And materials from:
The Child Trauma Clinic, Baylor College of Medicine Texas Medical Center, Houston TX
and
Casey Family Services Center for Effective Child Welfare Practice
INFORMATION PACKET QUESTIONNAIRE

TOPIC 1: The Essential Elements of Trauma Informed Parenting

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Only one person per questionnaire. Feel free to make additional copies if needed.

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EMAIL: ________________________________

☐ YES! I would like to receive ACRF email. *Includes Training Tracks Newsletter, training reminders and community events or training of interest for Resource Families*

Are you a foster parent?  ☐ YES  ☐ NO  If YES, what is your Foster Home License #: ________________________________

If NO, please check one:  ☐ Pending Foster Parent  ☐ OCS  ☐ Birth Parent  ☐ Adoptive Parent

☐ Residential Treatment Facility (License #: ________________________________ )  ☐ Agency: ________________________________

☐ Other (please specify): ________________________________

Please read the information packet. Then fill out this questionnaire and RETURN TO: ACRF, 815 Second Avenue Suite 101, Fairbanks, AK 99701. Or fax it to: 907-479-9666, you will be credited with 1.0 hour for completion of this worksheet.

1. This packet presents concepts and ideas that may be useful to your foster parenting experience. Please list two (2) specific ideas or concepts which you learned or reaffirmed from reading this packet. Write a short sentence or two describing how you can use them in your family.

   a)

   b)
2. List each title in this packet. In a few sentences for each article, summarize the main purpose or key points for each article in this packet.