



The
ADOPTEE
collective

www.theadopteecollective.com

understanding the impact of trauma

TRAUMA INFORMATION GUIDE



what you can't see
MATTERS

Trauma changes a
person in
invisible ways,
with lasting impact.

What are the root causes of trauma?

- prenatal stress
- exposure to drugs or alcohol in utero
 - birth trauma
 - severe illness or injury
- hospitalizations during infancy
 - abuse or neglect
- grief from significant losses or changes in caregiver & environments
- exposure to trauma or disaster
(*stress, instability, and chaos all cause secondary trauma*)

Avoid microaggressions

HAIR CARE

IT'S VERY
IMPORTANT TO
TAKE PROPER
CARE OF THE
CHILD'S
NATURAL HAIR

PRIVACY

LET THE CHILD
OWN THEIR OWN
STORY. DON'T
SHARE IT.

NOT FULLY ACKNOWLEDGING RACIAL IDENTITY

DON'T JUST ACKNOWLEDGE
THEY'RE BLACK
-- ACKNOWLEDGE
BLACKNESS &
WHAT THAT
MEANS

IGNORING THE TALKS

INITIATE
HARD
RACIAL
TALKS

SAVIOR COMPLEX

DON'T HAVE ONE

Love is not enough

trauma has wholistic impact on a person

RELATIONAL IMPACT

TRUST ISSUES, FEAR INTIMACY,
RELATIONSHIPS ARE
DIFFICULT DUE TO
RELATIONAL
TRAUMA

SENSORY PROCESSING

SIGHTS, SOUNDS,
TASTES, TEXTURE,
& CLUTTER CAN
BE OVERWHELMING:
SENSORY PROCESSING
DYSFUNCTION IS
COMMON

NEUROLOGICAL CHANGES

INABILITY TO ACCESS HIGHER LEVEL
FUNCTIONS AS THE BRAIN IS STUCK IN
FIGHT, FLIGHT, OR FREEZE

ADHD DIAGNOSIS COMMON

LEARNING CAN BE IMPACTED

EPIGENETIC CHANGES

ENVIRONMENT &
EXPERIENCE CAN
ALTER WHICH
GENES TURN
“ON & OFF”

EMOTIONAL IMPACT

DIFFICULTY RECOGNIZING &
CONTROLLING EMOTIONS;
ANXIETY, SHAME,
GUILT ARE COMMON

managing common

trauma triggers

transitions

Trauma history includes many disruptions. This makes transitions such as leaving the house, new experiences, new people, and even small transitions within daily routines hard. Communicating what to expect and minimizing transitions is helpful.

sensory or emotional overload

Trauma impacts the brain's ability to process information. Keep a simple, calm environment without too much sensory input. Use weighted blankets, dim lights, fidget tools, sensory swings, and other sensory tools.

change in routine

Trauma includes unpredictability. Keeping a structured routine and environment to encourage a sense of security. Have a posted schedule and calendar, with pictures for pre-readers, and talk through the next day and what's coming next.

physical proximity

Trauma heightens a flight, fight, or freeze response for self-protection, makes physical proximity and intimate interaction difficult. Don't force affection, such as hugs, and be mindful that activities such as bathing may not feel safe. Felt safety is an important concept.

loss of control

Trauma means feeling out of control. Fighting for control is common, in areas such as food, toilet habits, and sleeping for children. Pick your battles - the person from trauma needs to feel empowered and given control whenever possible.

reminders of the trauma

Sights and smells may be triggers that remind the person of the trauma. Pay attention to reactions to note reminders.

understanding **trauma behavior in kids**

Common behaviors from trauma

- **EATING** Food insecurity and a need for control can lead to hoarding food, eating too fast, hiding food in the cheeks, refusing to eat, demanding food immediately, and other expressions of control. Healthy snacks should be always be accessible.
- **SLEEPING** Night time is a vulnerable time. In the quiet and dark, the mind and emotions run free. Night terrors & sleep interruptions are common. Caregivers, sleep near them to offer immediate comfort in the night. This builds trust and healing.
- **TOILET HABITS** Holding their bladder and bowels and bedwetting are common. Speak to your pediatrician to make a plan if this persists.
- **SEXUALIZED BEHAVIOR** Be mindful that the child may have watched or seen something inappropriate. They may a victim of being groomed or molested themselves, even if this is not identified in the case file. Don't leave the child alone with other kids outside of supervision; discuss with a caseworker if you see the child acting out sexually.
- **PLAY** Inability to focus and short attention span are common. The child may also be unsure of how to play. Carefree play is often a luxury that children from trauma haven't had.
- **SOCIAL HABITS** Expect that the child will struggle to share or may be withdrawn or overly friendly. Indiscriminate affection and a willingness to going to anybody are also common. Aggression toward other children is another trauma behavior.
- **EMOTIONAL** The child may be overly emotional, lack emotion, or show inappropriate emotions. Trauma is expressed in anger, sadness, withdrawal, and many other emotions.
- **REGRESSION** Regressing to earlier stages is not uncommon. In fact, returning to actions of "earlier routines" can help build attachment and promote healing. For example, rocking an older child or continuing to feed or hold a child with a cup at bedtime recaptures missed stages.

Operating from the primitive brain

Trauma causes the person to operate from the base level of their brain. This shuts off the more highly developed areas of the brain. They are often stuck on a HIGH alert with frenzied emotions and a heightened fight, flight, or freeze response. Or, they may be stuck on LOW with depression, lethargy, and withdrawal.

8 Healing Daily Habits

Trauma informed and helpful practices

- 1. SLEEP.** Night time is a vulnerable time, and sleep interruptions or night terrors are common. Good sleep is important for well being and coping skills.
 - *Consistent bedtime routine helps promote security, and helps to prepare for sleep.*
 - *No screens for 90 minutes before bed.*
 - *Caregivers: Respond to sleep interruptions quickly, offering comfort readily.*
 - *Use weighted blankets or sensory sheets to encourage a sense of comfort.*
- 2. ROUTINE.** A consistent flow in the day brings the structure and predictability that builds felt safety. *A chart with the routine is a great way to make this concrete to a small child - or anyone.*
- 3. FOOD.** Regular snacks and good nutrition promote emotional regulation and brain health. Caregivers: Keep healthy snacks available to the child to combat control issues and to minimize food insecurity.
- 4. SET EXPECTATIONS.** Intentionally set expectations for the day (or next day) to help promote security. Find answers to questions and diminish the unpredictability. Transitions are triggers, so manage them by preparing for the unknown as much as possible.
- 5. NOTE TRIGGERS: AVOID OR DIMINISH THEM.** When an emotional meltdown or bad day comes, note the events just prior to that and note as a possible trigger, avoiding and diminishing those triggers as much as you can.
- 6. SENSORY INPUT.** The ability to process sensory input is impacted by trauma. Avoid sensory overload and practice daily sensory self-care. Watch the 3 videos about Sensory Processing on our website, and download our free daily sensory self-care log. www.theadopteecollective.com
- 7. REGULAR “HAPPIES.”** EVERYONE needs to have “their cup filled” emotionally. Maintain a routine that allows for hobbies, quality time, family fun, alone time, time off-- all the things each family member needs to keep filling up. Trauma is draining.
- 8. USE TBRI™ approaches.** Trust Based Relational Intervention™ is a proven model to help promote healing in kids who come from trauma. Use TBRI™ approaches! Even if you don't see immediate results. Stay consistent and keep going with them. Inform other caregivers about them. Go to the website for the Karyn Purvis Institute for Child Development at www.child.tcu.edu to learn more from the experts.

TBRI™

Trust Based Relational Intervention™

Trauma informed care is:
INTERACTION FOCUSED ON BUILDING TRUST,
rather than behavior modification.

Trauma informed care:

- Focuses on CONNECTION and relationship
- Offers safety and trustworthiness
- Uses choices and collaboration
- Encourages skill-building and competence

The TBRI™ approach:

- Consider the child in context of their trauma history
- Looks beyond the behavior
- Coaching, choices, redirects, do-overs

Go to www.child.tcu.edu to learn more from the experts and to find a TBRI™ Practitioner near you.

Read *The Connected Child* to learn more.

Look for Dr. Karyn Purvis videos on YouTube.

TBRI™ Trust Based Relational Intervention™

(Pioneered by Dr. Karin Purvis at TCU)

TBRI™ is a proven approach to facilitate healing for children who have experienced trauma.

Living with a person who has trauma history

can lead to

Secondary Trauma

Being a caregiver or family member of a person from trauma carries an emotional impact, like being an eyewitness to a disaster can lead to a post traumatic effect.

TAKE CARE OF YOURSELF.

YES, IT CAN BE HARD.

REMEMBER THAT WHAT THEY'VE BEEN THROUGH IS HARDER.

Signs of Secondary Trauma

- Feeling numb or detached
- Feeling angry, depressed, or overwhelmed
- Lacking energy and motivation
- An inability to accomplish tasks
- An inability to make decisions
- Withdrawing physically or emotionally
- An inability to concentrate

And the Siblings

- aggression, irritability, anger
- regression
- headaches & stomach aches
- anxiety and sadness
- sleep and eating changes
- jealousy
- withdrawal, trouble in school

Coping Skills

for everyone

IT'S OKAY TO NOT BE OKAY.

THINK ABOUT YOUR BANDWIDTH.

Pay attention to when emotional capacity is drained or limited.

Trauma requires everyone to be guarded with other demands, responsibilities, and stressors.

“The expectation that we can be immersed in suffering and loss daily and not be touched by it is as unrealistic as expecting to be able to walk through water without getting wet.”

- Dr. Rachel Remen

What to Do:

- Anticipate and plan ahead. Simplify life, eliminate other demands.
- Have safe emotional places to speak honestly.
- Take help. Have wraparound care established. If this is hard, ask a friend to be a point person to rally help as needed.
- Seek counseling for all.
- Be “teflon.” Don’t let criticism or well-intentioned comments and advice from others stick to you.
- Quit Taking It Personally. It’s not about you as trauma’s impact comes to the surface.
- Keep soul-filling and “happy things” in your regular routine for all family members.
- Establish a safety plan.

Establish a Safety Plan

- Have a family meeting to explain and discuss a safety plan: why, what, how.
- Have established practices for expressing feelings, and establish family rules.
- Allow family members to express their feelings respectfully. Coach continuously.
- Identify and define warning signs for each family member.
- Discuss what is an emergency and how it will be handled.
- Give every family member permission to have a place to go to calm down.
- Have an outside contact to call in an emergency. (*caseworker, friend, pastor, etc*)

Trauma's Impact

on emotional capacity



Normal Capacity

Without a major stressor or emotional trauma, a person can start each day with a healthy emotional capacity.

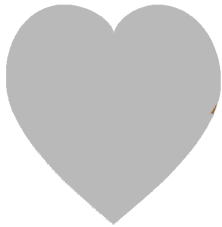


Limited Capacity

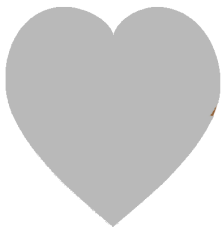
When living with an ongoing stressor or a past or present trauma, a person is always starting with a limited emotional capacity.

Connection Helps Emotional Capacity

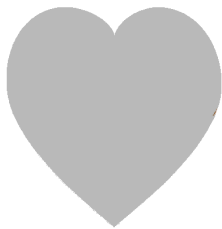
31 ways to build connection



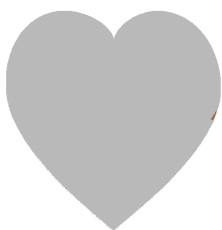
- read aloud
- take a walk
- build a fort
- dance party
- go on a date
- play outside
- get ice cream
- go to the park



- color together
- do crafts together
- play a favorite game
- make a favorite meal
- watch a favorite movie
- have a picnic (inside or out)
- tell a story about shared experiences



- plant a garden to tend together
- plan and do acts of kindness
- plan a family night together
- keep a gratitude journal together
- ask about feelings, interests, opinions
- share highs/low of the day at dinner
- find ways to play together, having fun



- tell a story taking turns every other sentence
- tell each other something you appreciate about each other
- do chores together, playing loud music as you work
- take turns picking a recipe & being assistant chef
- go to dollar store and spend \$5 on something fun
- put your phone away; give your full attention
- start a journal together, passing notes back & forth
- drive time (*non-threatening talks, not face-to-face*)

DE-ESCALATION TOOLS

DON'T TRY
TO
REASON

DON'T
MAKE
DEMANDS

PICK
YOUR
BATTLES

LIMIT
SENSORY
INPUT

VALIDATE
FEELINGS

RESPECT
PERSONAL
SPACE

WATCH
BODY
LANGUAGE

GET ON
PERSON'S
LEVEL

TRY
DISTRACTION

HELP
NAME
EMOTIONS

IGNORE
VERBAL
AGGRESSION

ANSWER
QUESTIONS

SILENCE
INSTEAD OF
REACTING

MOVEMENT
BREAK

DECREASE
STIMULATION

KEEP
FOOD
AVAILABLE

GO TO
CALMING
SPOT

GIVE
CHOICES

PRACTICE
DEEP
BREATHING

REMAIN
CALM

OFFER
A
DRINK

CALMING STRATEGIES

for everyone

COUNT
TO
FIVE

LISTEN
TO
MUSIC

TALK
TO
SOMEONE

COLOR
OR
DRAW

EAT
OR
DRINK

PLAY OR
EXERCISE

READ

TAKE
A
BREAK

A Trauma Informed Lens

CONTEXT

The person must be seen in the context of their trauma history.

RESPECT

People with trauma history need to feel respected and honored.

EFFORT

Effort -- not results-- needs to be praised and celebrated.

FEELINGS

Feelings shouldn't be punished. Name and identify feelings.

CONFIDENCE

Success should be praised, and instilling confidence is important.

REMEMBER

Behavior reflects emotion and is a symptom of the trauma.

COACH

Emotional regulation is a skill to learn that leads to better coping skills.

CHECKLIST

Go through the checklist--
Hungry? Tired? Thirsty?
What's behind behavior?

Promote Healing

The IDEAL Approach

Purchase the IDEAL Approach tip sheet from the Karyn Purvis Institute for Child Development at

www.child.tcu.edu/resources

You're on the Same Team

A person with trauma history needs those around them to join their team against trauma's impact - NOT to fight against them.

Use Emotion Charts

Tools like an emotion chart with faces for different emotions helps to identify and name feelings.

Validating and identifying emotions are keys toward coaching and learning healthy expression of them.

Respect Birth Parents

How a person feels about and views their birth family is intrinsically tied to how they feel about and view themselves.

Honor the adoptee by holding sacred space for all the members of their family and history.

These things add to trauma

Savior mentality

The superiority complex of “saving” OR “rescuing” the child adds to trauma by assuming the child is indebted and gratitude is expected from them.

Child is “lucky”

The idea of the child being “lucky” denies the brokenness and pain that the child experienced with the losses from their first family.

Breaking confidence

The child’s life story should be guarded carefully. Don’t share the details of their history with others.
Have a prepared answer for curious people.
Honor the adult the child will someday be.
Teach and model honoring language to the child, maintaining their dignity. Give the child an increasing voice as they mature to own their own life story. Do not share unless the child has given consent.

Defining their identity for them

Encourage the child to discover and define their own identity. Let them explore their own interests and talents. Give them ways to claim their own story and tell it in their ways.

Ignoring their perspective

The child is the most powerless in the adoption and fostering process. Yet, it is their life and future at the heart of it. Keep the child’s viewpoint in mind.



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The Adoptee Collective is an initiative seeking to give voice to the stories of adoptees of all ages and vulnerable children worldwide. This is accomplished through the creation of resources for adoptees, and for families and practitioners from the viewpoint of the adoptee.

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