

# UNDERSTANDING THE EFFECTS OF TRAUMA

Week 2

## TRAUMA-INFORMED CAREGIVING



NCTSN



# TRAUMA RESPONSES

## Physical Changes and Reactions

- Decrease in sense of personal safety
- On alert for danger
- Quick to startle
- Irritability/anger
- Risky & self-destructive behavior
- Sleep or concentration problems
- In young children, more intense and/or more frequent temper tantrums



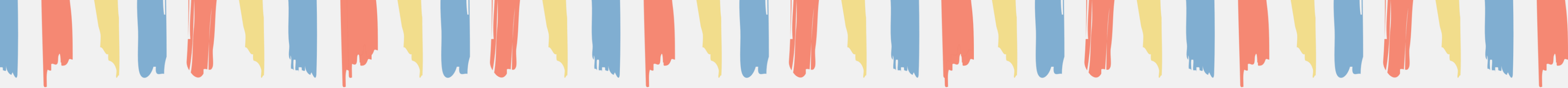


# TRAUMA RESPONSES



## Re-Experiencing

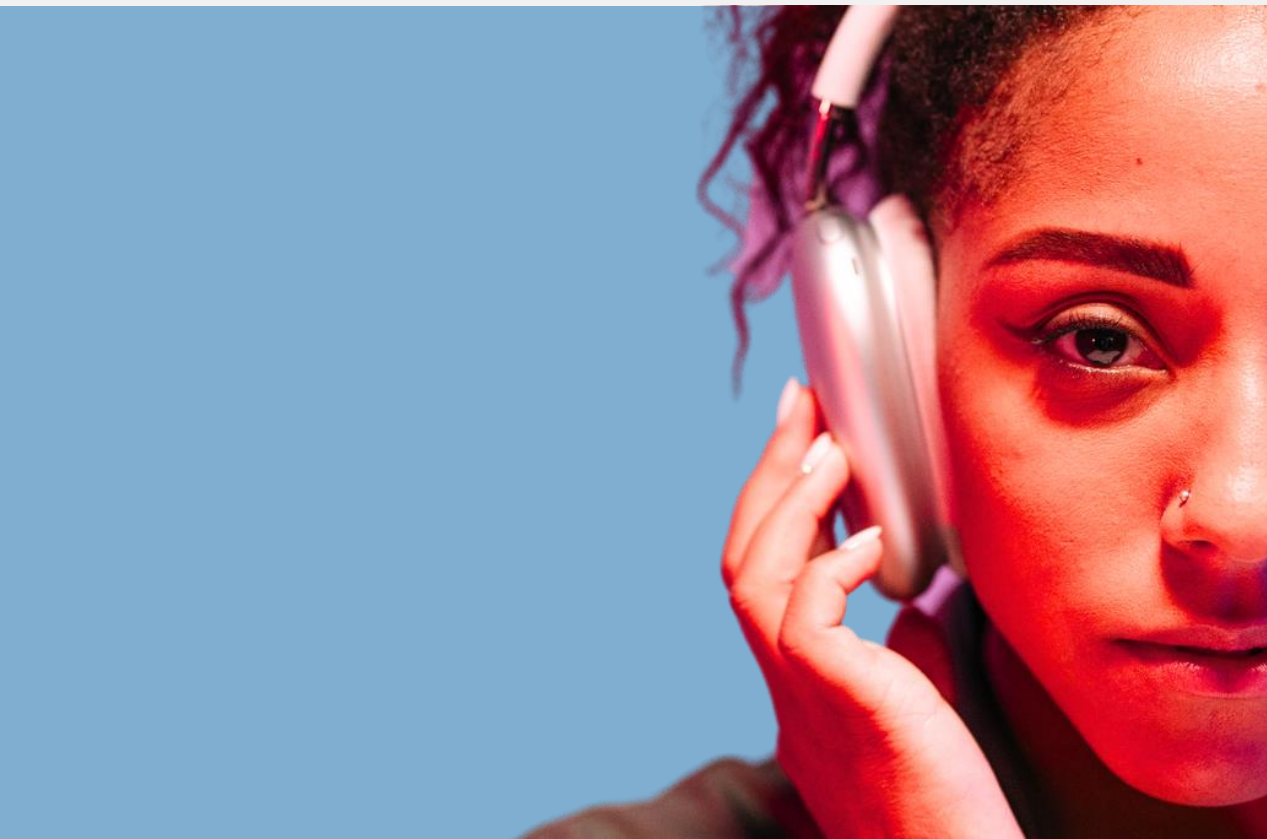
- Intrusive images, sensations, dreams
- Intrusive memories of the traumatic event or events
- In young children, repetitive or re-enactment in play.



# TRAUMA RESPONSES

## Avoidance

- Avoiding people, places, or things that prompt memories of the trauma
- Trying not to have thoughts, feelings, or memories about the trauma





# TRAUMA RESPONSES

## Changes in Thoughts & Mood

- Difficulty managing emotions; emotional instability resulting in mood swings, sadness, anger
- Pulling away from activities and relationships
- Difficulty trusting others
- Stuck in negative thoughts and feelings
- Beliefs about self-worth
- Blaming self for bad things that happened
- Memory challenges



# Instinctive Trauma Responses



## **FIGHT**

MOVES TOWARDS THREAT

screaming, crying, clinched fists, anger, rage, staring, glaring, angry tone, using insults, hitting, kicking, biting, blaming, defensiveness, defiance, aggression



## **FLIGHT**

MOVES AWAY FROM THREAT

nervous, anxious, fidgety, need to move, restless, excessive exercise, running away, unfocused, busy, procrastination, anxiety, fear, panic, overwhelmed

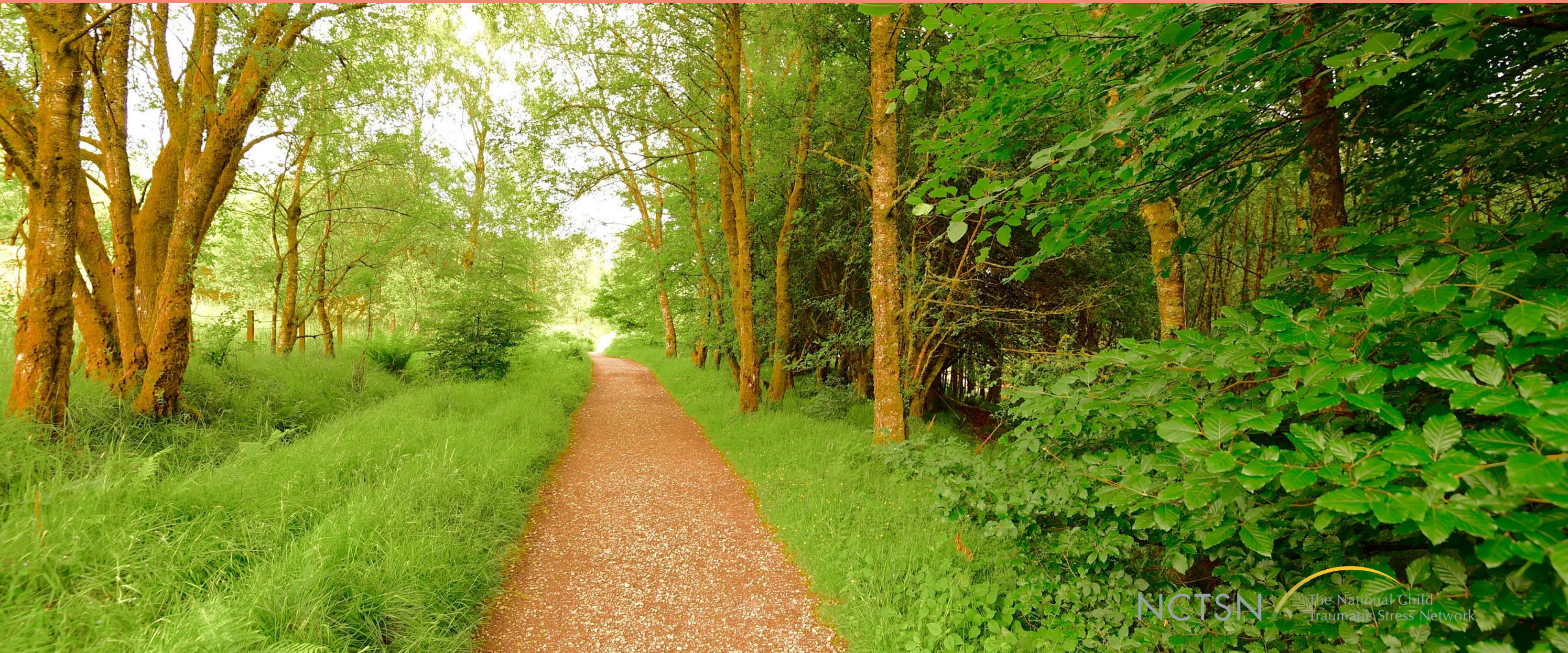


## **FREEZE**

UNABLE TO MOVE

feeling stuck, frozen, numb, indecisive, restricted breathing, sense of heaviness, shutting down, self-isolation, zoned out, depressed, numb, bored, apathetic, helpless

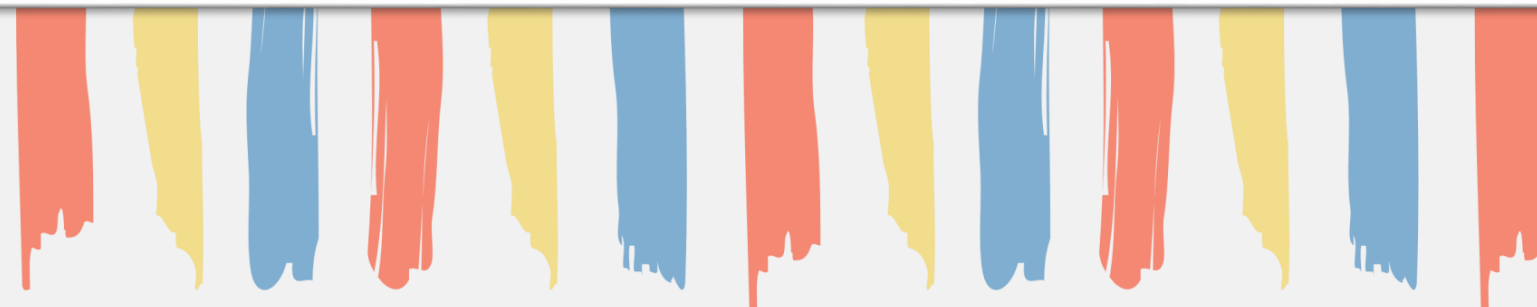
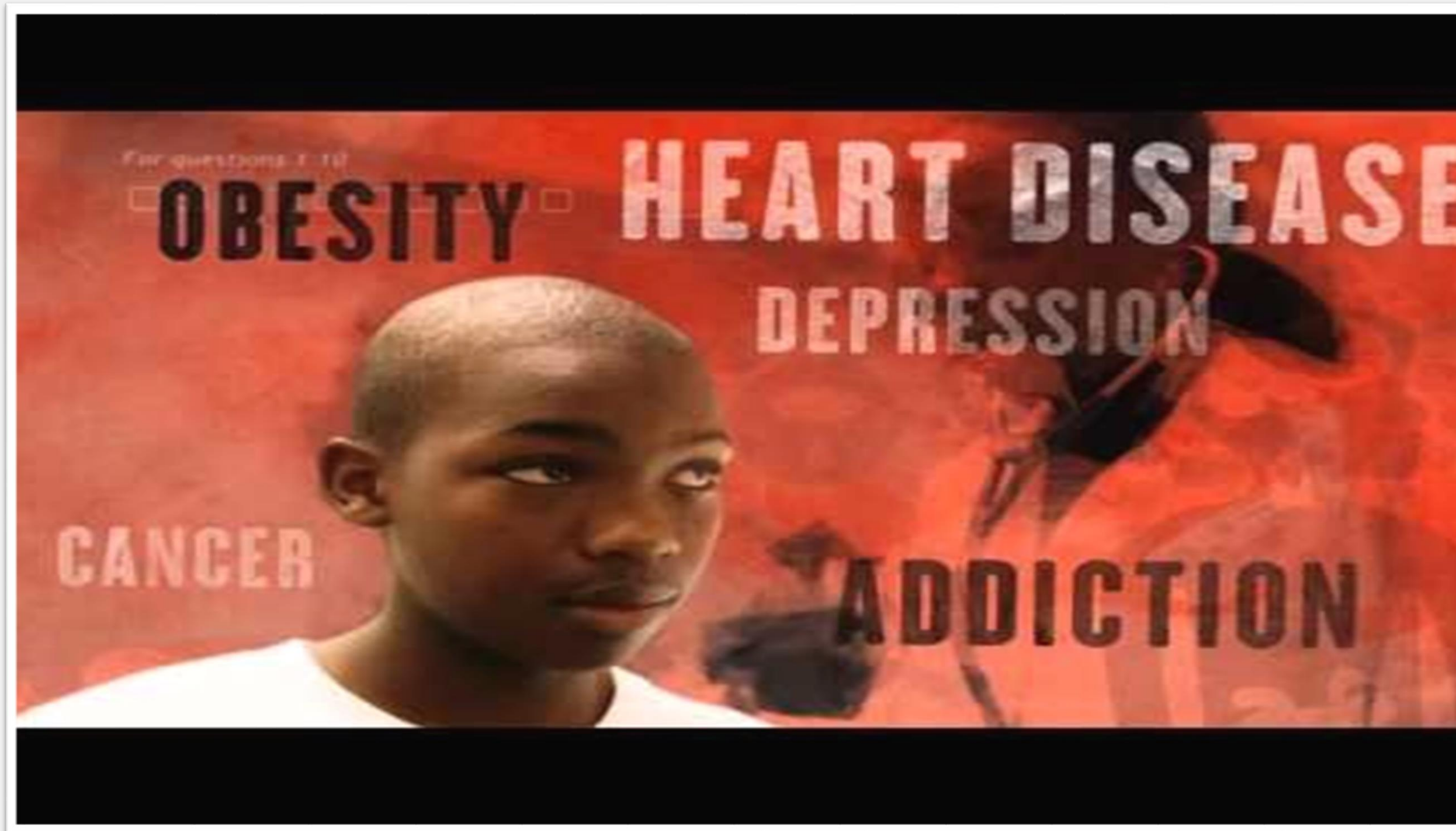
# Imagine...



NCTSN

The National Child  
Traumatic Stress Network

# THE BIOLOGY OF TOXIC STRESS



NCTSN

The National Child  
Traumatic Stress Network



# THE STRESS RESPONSE CYCLE



# THE STRESS RESPONSE CYCLE IN CHILDREN



## FIGHT

Yelling, Screaming, Using Mean Words

Hitting, Kicking, Biting, Throwing, Punching

Blaming, Defensive, Deflecting Responsibility

Demanding, Controlling

Labeled "oppositional," "defiant," "noncompliant"

Moving Towards Threat

Irritable, Angry, Furious, Offended, Aggressive



## FLIGHT

Wanting to Escape, Running Away

Unfocused, Inattentive

Fidgeting, Restlessness, Hyperactivity

Preoccupied, Busy with Everything But the Thing

Procrastinating, Avoidant, Ignores the Situation

Moving Away from What Feels Threatening

Anxious, Panicked, Scared, Worried, Overwhelmed



## FREEZE

Shutting Down, Mind Goes Blank

Urge to Hide, Self-Isolates

Verbally Unresponsive, Says, "I don't know" a lot

Difficulty with Completing Tasks

Zoned Out, Daydreaming

Unable to Move, Feeling Stuck

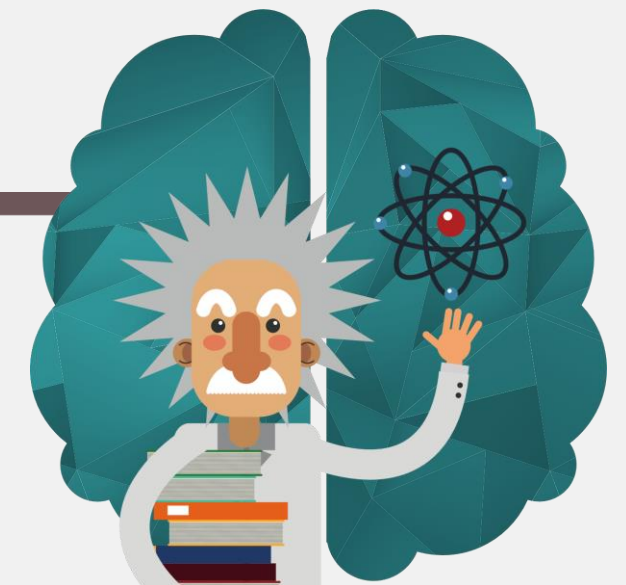
Depressed, Numb, Bored, Apathetic, Helpless

# Experience grows the brain

Brain development happens from the bottom up.  
From primitive . . . . . to more complex



**(basic survival)**

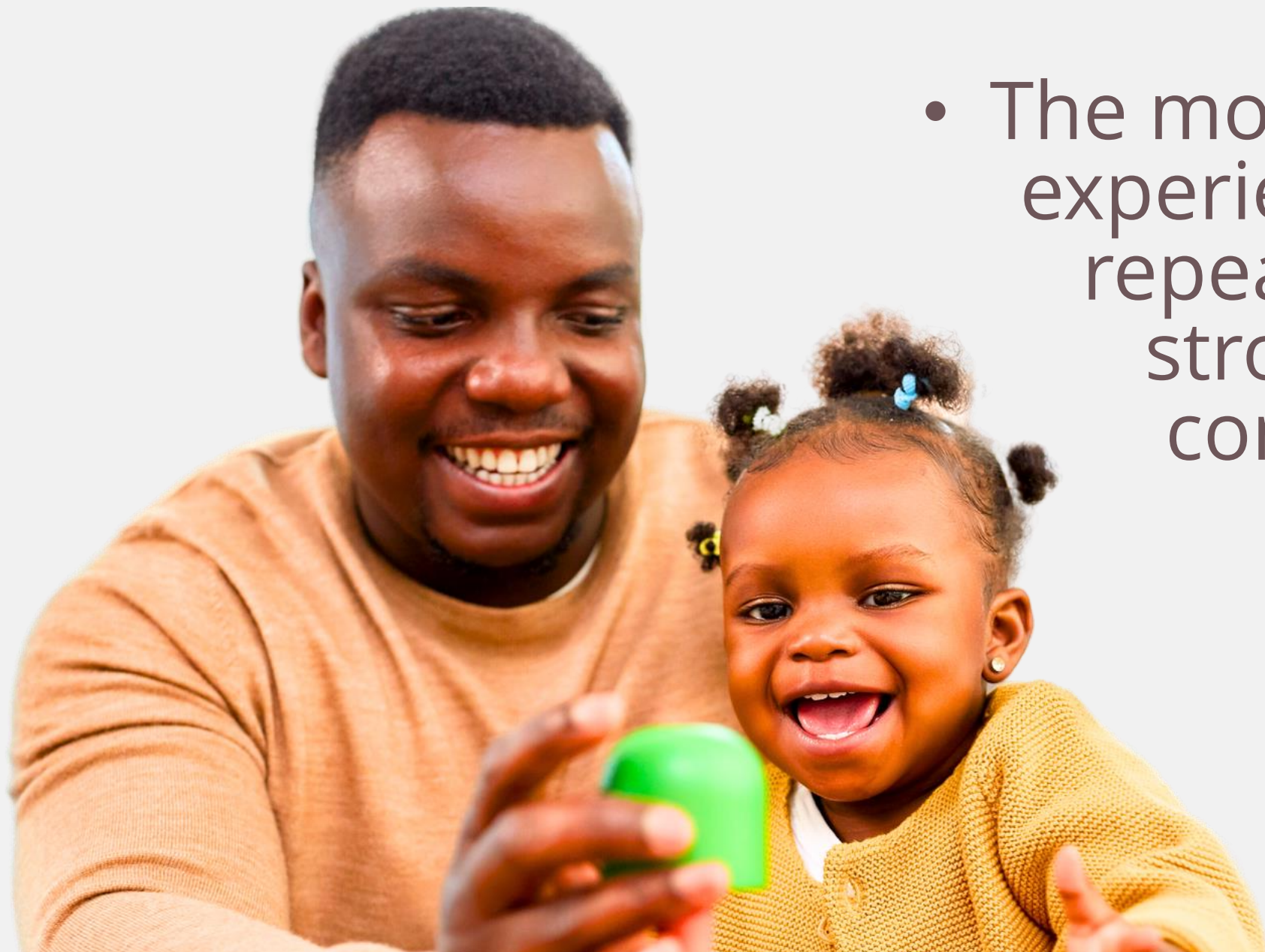


**(rational thought,  
planning, abstract  
thinking)**



# Brain Development

- The brain develops by forming connections.
- Interactions with caregivers are critical to brain development.
  - The more an experience is repeated, the stronger the connections become.



# Trauma Derails Development

Exposure to trauma causes the brain to develop in a way that will help the child survive a dangerous world:

- On constant alert for danger
- Quick to react to threats (fight, flight, freeze)

The stress hormones produced during trauma also interfere with the development of higher brain functions.



# FLIPPING YOUR LID



NCTSN

The National Child  
Traumatic Stress Network

# IMPACT OF CHILDHOOD TRAUMA

## EMOTIONS

Difficulty controlling emotions  
Trouble recognizing emotions  
Limited coping skills  
Increased sensitivity to stress  
Shame and guilt  
Excessive worry, hopelessness  
Helplessness, lack of self-sufficiency

## RELATIONSHIPS

Attachment disorders  
Poor understanding of social interactions  
Difficulty making friends  
Problems in romantic relationships  
Intergenerational cycles of abuse and neglect

## BEHAVIOR

Poor self-regulation  
Social withdrawal  
Aggression  
Poor impulse control  
Risk-taking/illegal activity  
Sexual acting out  
Adolescent pregnancy  
Drug and alcohol misuse

## PHYSICAL HEALTH

Sleep disorders  
Eating disorders  
Poor immune system functioning  
Cardiovascular disease  
Shorter lifespan

## MENTAL HEALTH

Depression  
Anxiety  
Negative self-image/low self-esteem  
Post Traumatic Stress Disorder (PTSD)  
Suicidality

## COGNITION

Impaired readiness to learn  
Difficulty problem-solving  
Language delays  
Problems with concentration  
Poor academic achievement

## BRAIN DEVELOPMENT

Smaller brain size  
Less efficient processing  
Impaired stress response  
Changes in gene expression



# GETTING DEVELOPMENT BACK ON TRACK

**We learn through corrective experiences that:**

- Build self awareness
- Strengthen coping skills
- Enhance our internal narrative





# Understanding dysregulation: How to support a highly emotional child

Dysregulation occurs when the brain responds to sensory input in a manner that triggers the alarm state.

When a child is dysregulated, it is harder to listen, comprehend, and cope.



## REMEMBER THE THREE "R"S

**R**EGULATE. Focus on soothing your child. Make them feel calm, safe, and loved.



**R**ELATE. Validate their feelings with your words and tone of voice. "I know you're upset right now. This is very hard." Focus on connecting with your child.

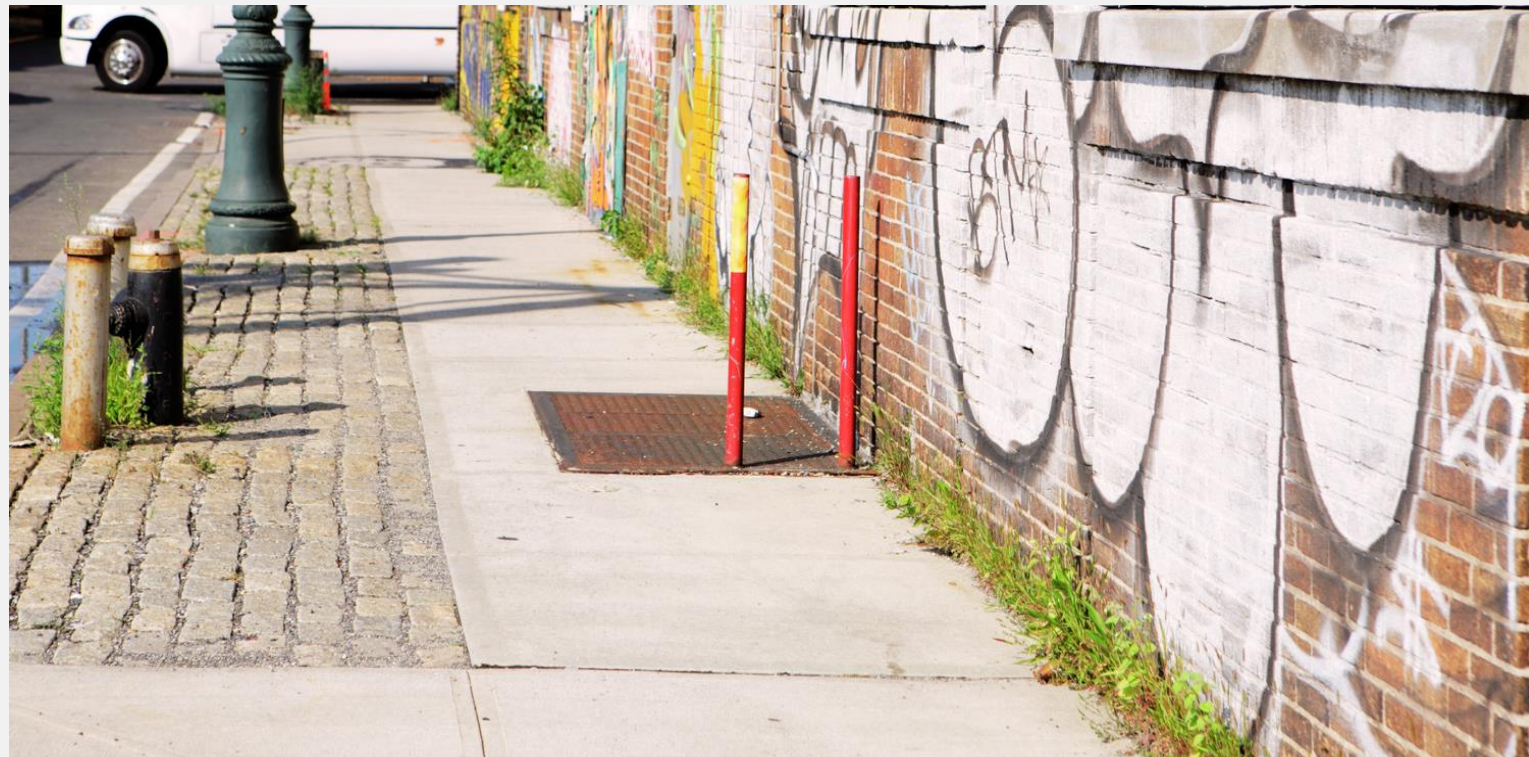


**R**EASON. Once your child is calm, now it is time to talk about alternatives to behaviors while reinforcing limits you set before. You can reassure them you love them but that the behavior they're exhibiting is not okay.



Until a child is regulated, they are unlikely to feel related (connected and comfortable). And until a child is related, they are unlikely to have the mental capacity to reason with you.

# RECOVERING FROM TRAUMA: THE ROLE OF RESILIENCE



**Resilience:** the ability to adapt to difficult or challenging life experiences through mental, emotional, and behavioral flexibility.

NCTSN

The National Child  
Traumatic Stress Network



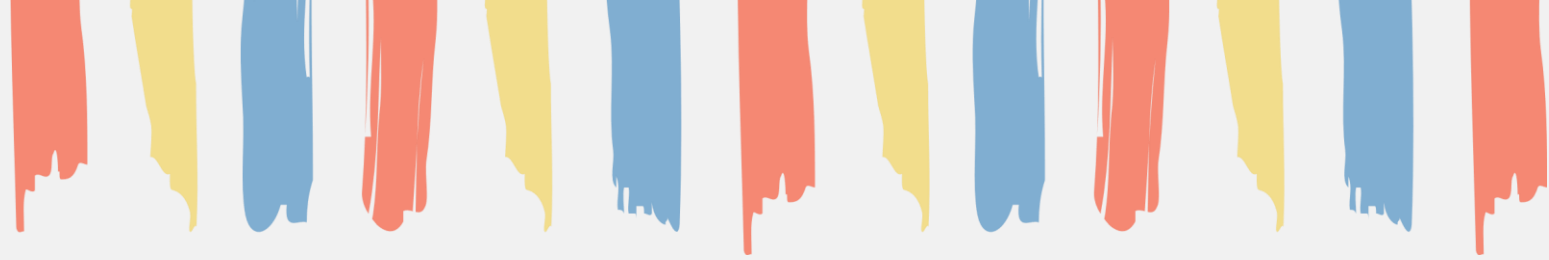


# GROWING RESILIENCE

Factors that can increase resilience include:

- A strong relationship with at least 1 caring adult
- Feeling connected to a positive role model/mentor
- Having talents/abilities/skills **RECOGNIZED** and nurtured
- Feeling in control over some aspect of life
- Having a sense of belonging to a community, group, or cause larger than self





# Thoughts, reflections, and questions

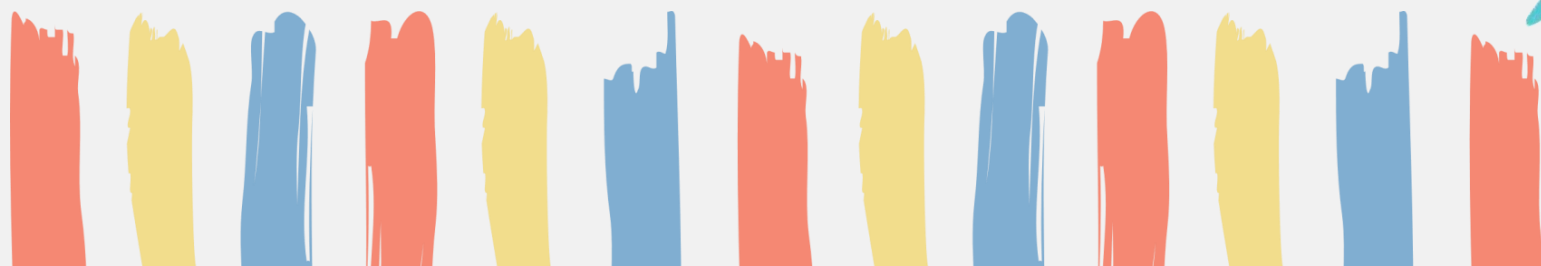
What did you hear for the **FIRST** time today?

What do you want to **KNOW** more about?

What did you **DISAGREE with**?

What did you **AGREE with**?

What stood out to you today?



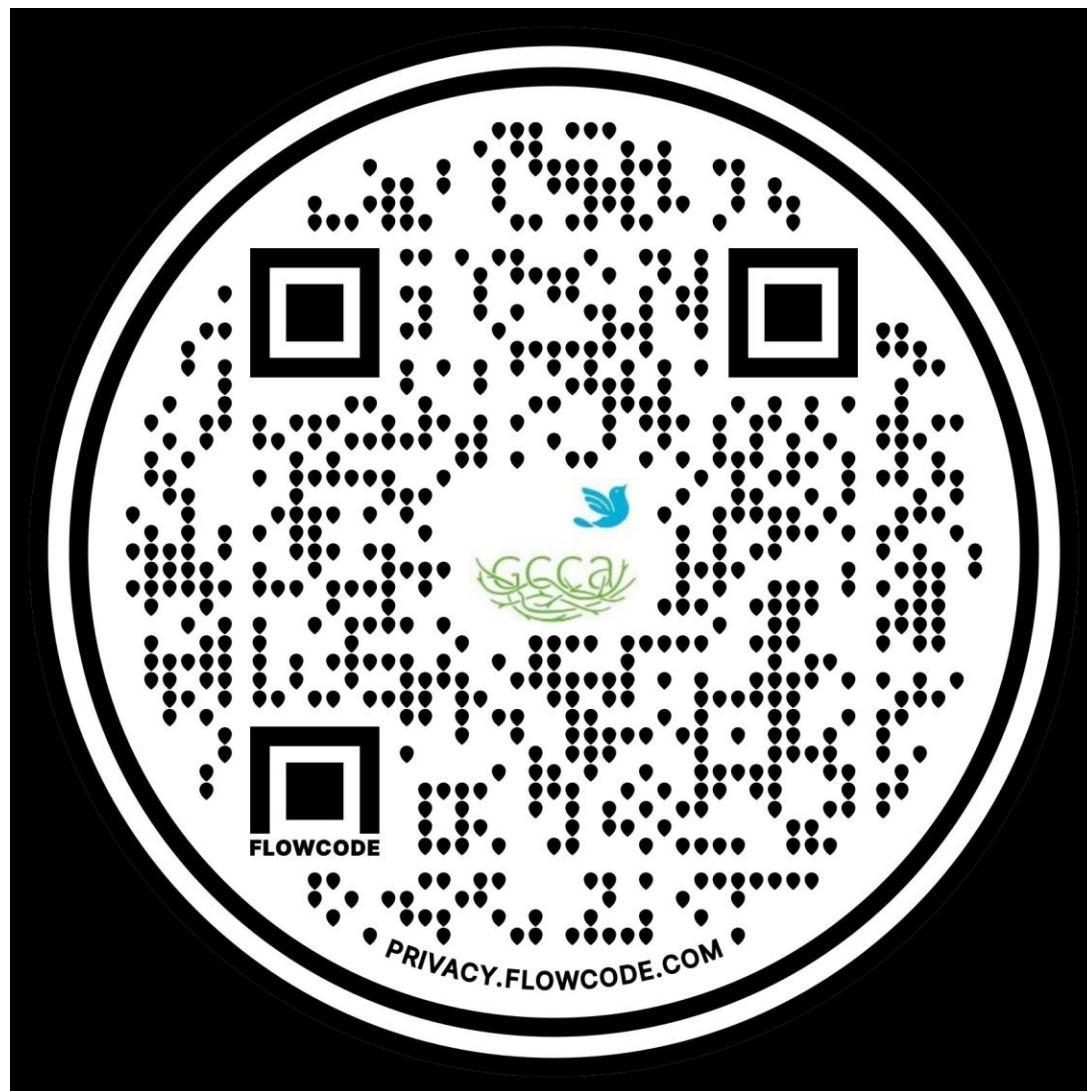


# RESILIENCE HOMEWORK

(RESILIENCE HOMEWORK--PICK 2 QUESTIONS BELOW)

- What does your child see as being within their control?
- What strengths or talents can you encourage?
- What skills could you help them develop?
- What people have served as sources of strength?
- What people have served as role models?
- What causes does your child participate in?

# BEFORE YOU GO



Step 1: Scan this QR code

Step 2: Select “Caregiver Survey 2”  
for this module

Step 3: Provide your feedback

Thank you!

NCTSN

The National Child  
Traumatic Stress Network