

Trauma in Children in Out-of-Home Care

Entering out-of-home care (OOHC) is frightening for many children, even when they are being cared for by relatives they know and love. However, it's important not to assume they are fearful. For some children it may also bring a sense of relief. Consider the background, circumstances and personality of each individual child and provide suitable supports specifically for them. It is highly likely they will have experienced abuse and/or neglect. Many children will be coming to live in a home they know nothing about with people they have never met. A child usually grieves the loss of their parents and needs to adjust to the sudden changes in their life (Single, 2005).

While many children adjust to their new carers, over time behavioural and emotional problems may emerge related to the trauma they have experienced. The effect of neglect and abuse is different for every child, even for children within the same family. Children express their responses to their experiences differently.

It is important to remember that children can heal from their experiences with support, stability, love and for Aboriginal and CALD children, connection to their culture. While you cannot change what happened to them in the past, you can strive to see the child behind the 'traumatised' - 'problem child' label. For children who struggle, your role is to:

- listen to them
- reassure them and help them explore their feelings (where they are ready)
- validate the child's strengths and resilience
- help identify what helps them feel safe
- support their carers to understand and respond appropriately to their trauma
- identify and keep them connected to their family and other people who love and support them
- challenge the inequality and disadvantage they experience
- link them to those who can help them heal.

By working in this way, you have the opportunity to restore the child's sense of self and dignity and contribute to their healing. This will help you sustain your passion for the work you do and the caregivers' reasons for becoming a carer.

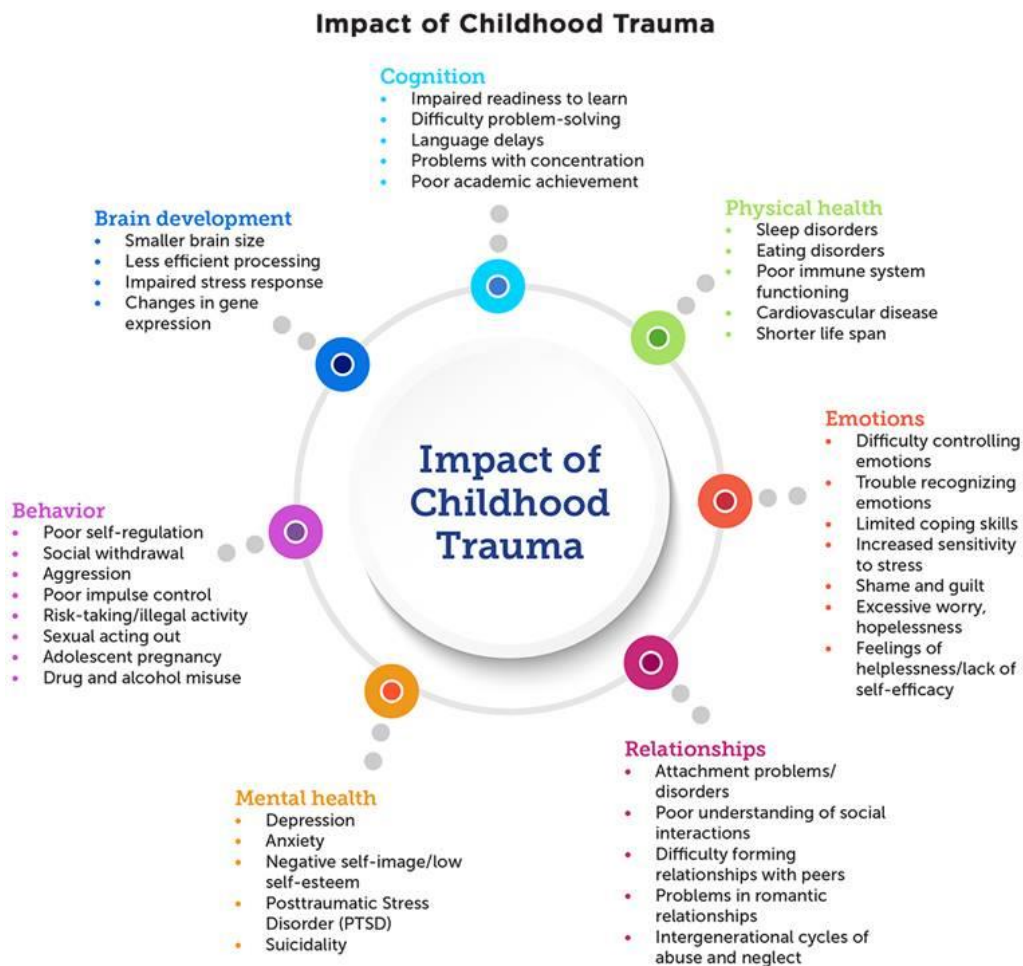
“Trauma can affect a child’s behaviour in ways that may be confusing or distressing for carers. It can affect the child’s emotional, social, and educational wellbeing as well as their long-term health. However, with stability, understanding, building connection, and relationships and engaging in therapy (if required), a child can heal and thrive after trauma”.

- Child Welfare Information Gateway, 2014

Understanding Trauma for a Child in Care

When a child experiences trauma over an extended period, their bodies, brains, and nervous systems are in survival mode. Once a child is in a safer environment, their brains and bodies may not recognise the danger has passed. The protective behaviours or habits that have helped them survive, physically and emotionally, can be hard to change. It takes time for a child to understand that survival practices are not needed in their new environment. It is essential for a child and carers to remember that behaviours are often a response to stress and are involuntary responses.

The following diagram lists some of the common effects of childhood trauma. It’s important to remember that not all of these challenges will be experienced by people affected by childhood trauma. Some people may experience one, while other may experience many:



Source: Child Trends, 2019

For more information, see: [Trauma and Brain Development](#) (factsheet coming).

Professional Support

One way you and the carer may help the child begin to understand their trauma and their feelings and responses (behaviours) is to provide opportunities for the child to tell their story with the support of a professional through therapy i.e., a psychologist or counsellor. This may be verbal, through pictures, play, dance, and other creative means. The professional will follow the child's lead and not force them.

Some children may not be ready to open up or know how to express the experiences. Remember, that retelling the past can be experienced as 'reliving it'. Your and the carer's role will be to follow the professional's advice, but be prepared to respond openly at times

to the child if they choose to talk to you about their trauma. Always update the professional on any discussion and gain advice on responding to these conversations.

Provide Reassurance about their Reactions

Ensure you let the child know their behavioural responses are normal, related to their experiences and will pass over time. Let them know it is their body trying to help them. Help the carer understand the behaviours are out of the child's control. Allow the child time to process their traumatic experience. Don't forget to do fun things with the child so they build positive connections and happy memories.

“Encourage the child to remember the positive experiences and support them to make sense of the negative ones. Sometimes simply listening to and witnessing the child tell their story can be healing”

- Jackson, Waters, Meehan, Hunter & Corlett, 2013

Life Story Work

Life Story work can assist the child in understanding their journey prior to entering care and while they are in care. It is a method used to record the details about a child's history and personal development. Life Story Work helps children understand their family, connections and place in the world. It is a record of their life in words, pictures and photos. It's made by the child with the help of a trusted adult or other person who has a meaningful relationship with them. The child develops a stronger feeling of self-identify and self-esteem through learning about and accepting their past.

See: [Life Story Work](#) for more information.

For some children who have experienced trauma, their story will be harder to talk about. When their distress is trauma-related, they may be unable to discuss feelings and emotions because at that point, their 'thinking brain' is offline. Talk to the child when they are calm.

Trauma and Aboriginal Children

Aboriginal communities have their own understanding of trauma and healing practices. For many indigenous communities around the world, stories of survival are embedded in traditional stories. Trauma can be viewed as a living being, which shrinks and grows. The individual can learn to live with trauma inside them using it at times to guide them. When Aboriginal children have limited connections to culture, they can miss out on learning their cultural history and cultural healing practices.

For more information see: [Trauma in Aboriginal Communities.](#)

Common Behaviours of Children in Care

On the surface, children may appear animated and happy, even when they are deeply affected by their traumatic experiences.

Children may also show behaviours such as:

- insensitivity to pain
- blank staring episodes
- gorging and hoarding food
- hypervigilance or hypersensitivity
- sleep disturbances, rocking or other self-stimulating behaviour
- provoking or rejecting carers
- accident-prone
- manic or reckless behaviour
- self-harming.

Trauma Triggers

When a child is experiencing a trauma trigger, they behave in ways that may be unexpected and seem irrational or extreme. Triggers may be sounds, smells, feelings, places, postures, tones of voice, or even emotions. Depending on whether a child has a fight, flight, or freeze response, they may appear to be throwing a tantrum, willfully not listening, or being defiant. Their responses are not deliberate or planned. When a child's body and brain are overwhelmed by a traumatic memory, they are unable to contemplate the consequences of their behaviour or its effect on others, because they are reacting/responding rather than thinking. Their brain has gone 'off-line'.

“Caring for a child who experienced trauma, may require a carer to shift from seeing a bad child to seeing a child who has had bad things happen”.

- Family & Children Service, 2018

What Does a Child in Care Need?

A child in care needs you and their carers to listen actively, focus on the feelings that are driving their behaviour and help them develop healthy and adaptive strategies to cope with their past. They need support to build connections and healthy relationships with you, their carer, and others in the community, building emotional and cultural safety etc. let (Bath, 2016). Howard Bath’s explanation of the needs that a child in care may have is presented in [three sequential videos](#) that address feeling safe, healthy connections and adaptive coping from both a child and carer’s perspectives.

Children say:

"Sometimes we freak out when we don't need to. We might have heard something and now we think that it's a huge risk, but it could turn out that we've heard the wrong thing or that it's not really a problem." 'But sometimes we feel weird but don't know why and having an adult ask you questions, it doesn't even have to be an adult but maybe it's good to talk to an adult, and yeah for them to say, "What were they doing and why do you think they said that?" helps you clarify it and then you go, "Oh yeah, that was bad and that's why I felt that way."

Young Person, Taking Us Seriously Report (Moore et al., 2015, p61).

Connection to Family

Keeping a child connected to their family can help a child heal from trauma by:

- easing the pain of separation and loss for the child, their family and significant others
- reducing a sense of abandonment
- reducing their worries about other family members

- helping them develop a sense of belonging and emotional security
- understanding their story
- promoting the development of individual and cultural identity
- having a relationship with people who know and love them
- knowing their family will continue to be part of their life.

A child's trauma may make it hard for them to connect with one or both of their parents, or siblings. Listen to the child and work at their pace. Build connections in ways that support the child's safety. For example, if a child is frightened of face-to-face interaction, help them identify what will make them feel safe. You can also help children connect to their family through many different ways; texting, using videos or by sending pictures, photos and stories.

Effect on Carers

Children respond to changes in their care in different ways. Some children may be very accommodating at the start of a new placement, sometimes referred to as the 'honeymoon stage'. Once this phase is over, carers may feel personally rejected when a child shows defiant, aggressive, or other types of difficult behaviour. In most cases, the child is not intending to reject the carer but rather their behaviour and emotions are influenced by their previous ways of managing relationships. Let carers know that in most cases, these are temporary setbacks that will reduce with love, support, and a sense of permanency.

For a carer to support the child, it is important they understand the effects of the trauma on children's behavior. If carers respond as if the child's behaviours are willful or defiant (such as by using punishment) the child may either not respond or become further traumatised. (Child Welfare Information Gateway, 2014).

You can help by providing information about the child's experiences, helping them learn about trauma behaviours and giving them support and understanding. This is also where understanding the child's story from their own perspective is important because this detailed knowledge will allow caregivers to manage a child's behaviour and have empathy for what the child has suffered (Single, 2005).

Additionally, when faced with distressing interactions with a child, the carer may be reminded of their own unhappy childhood. The carer may become overwhelmed with negative feelings. This can cause them to behave in uncharacteristic ways and may lead to feelings of guilt, distress, and shame in carers (Single, 2005). If this is an issue, you should help them access professional help.

Things to Consider when Providing Support

All children, especially those in care, benefit from caregivers who provide predictable and nurturing environments that are supportive and comforting.

You can support a child and their carer by working in a trauma-informed way:

- Be **emotionally and physically available** when the child or carer is wanting to interact with you. Provide attention, comfort, and encouragement in ways the child will accept. Follow their lead and be patient if a child seems needy. The more time given to the child early on, the faster they child will settle and be less 'needy' in the longer term.
- **Respond and not react.** Your reactions may trigger the child. When the child is upset, try to calm them by lowering your voice, acknowledging the child's feelings, be reassuring and honest.
- **Support the child to feel their feelings without judgment.** Help them find words and other acceptable ways of expressing feelings and offer positive re-enforcement when these are used.
- **Listen** to the child. **Do not avoid difficult topics** or uncomfortable conversations and at the same time **don't force the child to talk** before they are ready.
- **Give the child choices** in the way they work with you, what you do together, what is discussed and what happens to them. This will help reduce feelings of powerlessness and help them feel safer with you.
- **Help the child identify trauma triggers.** However, be mindful that a child may not be able to identify their own triggers so it's important for those supporting them to be vigilant to triggers. **Talk to carer(s) about what patterns of behaviour they notice** and what reactions don't seem to fit the situation. What distracts the child, makes them anxious, or results in an outburst?
- Create strategies that **helps the child avoid situations that trigger traumatic responses.** And where it's not possible to avoid those triggers, **build strategies to manage their responses.**
- **Help carers** set out age-appropriate **boundaries and expectations that are reasonable** and consistent. Show them how to praise the child for desirable behaviours.

- **Work with the child on how to relax.** Encourage mindfulness where the child can practice slow breathing, listen to calming music, and/or say positive things such as “I am safe now”. However, be aware that for some children calming activities are more physical like going for a walk, swinging on a swing, jumping on a trampoline. Relaxing can be very difficult for some children.
- Be patient and note that **every child heals in their own way and time.** Also note that trust does not develop overnight, and that the child may test you and the carer repeatedly. When they do this, think about how important it must be to them given their trauma history, that they can really trust you.
- **Encourage self-esteem** by activities such as building connection/relationships, engaging in activities they enjoy, encouraging and allowing them to make choices. Positive experiences can help children recover from trauma and increase resilience (Child Welfare Gateway, 2014).

For more information, see: [Impacts of Trauma](#) and [What is ‘Trauma-Informed Casework’?](#)

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