Supporting Parents to Help Children Cope with the Effects of Domestic Violence

Fostering Healing and Resilience

Susan Blumenfeld, MSW, LCSW
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Allow space for reflection and mindfulness…….

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Part I

How are children affected by exposure to domestic violence?

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Children's Exposure to Stressful Experiences

- **Positive stress**
  - Entry to school or child care, managing frustration, routine medical care, riding a bike
- **Tolerable stress**
  - Adverse experiences that occur for brief periods, such as a frightening accident
- **Toxic or traumatic stress**
  - Stressful events that are chronic, uncontrollable

National Scientific Council on the Developing Child (2005)

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When is exposure to DV traumatic for children?

- **Sensations from the environment**
  - Sights, sounds, smells
- **Combined with sensations from inside**
  - Emotions, such as, intense fear, terror and helplessness, physical sensations

Experienced As So Strong…..

- Child can't cope and is overwhelmed

Van Horn (2008)

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Children and Trauma

- Trauma is the unique individual experience of an event or enduring conditions in which the individual's ability to integrate his/her emotional experience is overwhelmed.
- The individual experiences (either objectively or subjectively) a threat to his/her life, bodily integrity, **or that of a caregiver or family member.**

Saakvitne, K, et al (2000)

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What is the single most important predictor of PTSD in children, age 4 or younger?

- **NOT** threats to their own body….but witnessing threats to their primary caregiver

Scheeringa & Zeanah (2001)

Laura and her children, Allison, 3 ½ , and JJ, 16 months*

*Names and details disguised to protect confidentiality

Exposure to DV = A kind of traumatic stressor that compromises the child's source of safety and protection

When there is no safe haven…..

- The victimized partner is frightened, hurt, or may be emotionally unavailable while under siege
- The abusive parent or partner is frightening

Who can the child turn to?

Main and Solomon, 1990

Traumatic Stress and the Attachment Relationship

- Parent – child relationship can be highly sensitive to trauma
- Effects of trauma can occur when EITHER child OR caregiver experience trauma
- Effects are compounded when BOTH experience trauma AND their responses affect the relationship

DV can undermine the quality of the caregiving relationship and create risks for the child's ongoing development

P. Van Horn (2008)

What are the potential effects, over time, on children's development?

- Brain development, stress response systems altered
- Affects attachment relationships with primary caregivers….and others
- Capacity for self-regulation
- Self-esteem, efficacy
- Learning

Are all children affected in the same ways?

What accounts for differences in the traumatic impact of exposure to DV?

Think of two families who are currently receiving services from your transitional housing program

What influences traumatic impact?

- The child
- The nature of the traumatic event
- The social environment
- Secondary stress

Pynoos, et al (1999)

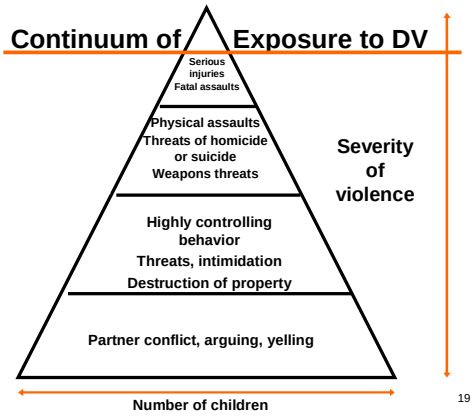
The Individual Child

- Age
- Biological/Inherent capacities
- Developmental stage
- Temperament
- Prior functioning
- Past experiences

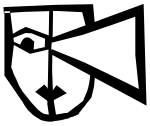
The Nature of the Event

- Severity
- Frequency
- Proximity
- Loss or injury to child or caregiver

Continuum of Exposure to DV



"I tried to protect them from seeing or hearing us"



- Between 68 – 80% of all domestic violence assaults are witnessed by children

The Social Environment

- Availability & quality of relationship with primary caregiver
- Level of family stress
- Extended family supports
- Social supports

Secondary Stress

- Ongoing impact (when the traumatic exposure is not "post")
- Disruptions/Losses
- Trauma reminders

Exposure to DV Co-occurs with Increased Risk of Child Abuse

- In 30%–60% of families where DV occurs, children are physically abused.
- Children in homes with DV are at higher risk for co-occurring incest and child sexual abuse.
- Children living in homes with DV are **15 times** more likely to be abused than those living in non-violent homes.

Cumulative Effects of Exposure to DV, Other Trauma or Adversities

Puts child or teen at increased risk:

- Ongoing domestic violence at home
- Exposure to community violence
- Economically disadvantaged
- Lack of access to community supports, intervention services and other resources
- Effects of racism, discrimination, and social injustice
- Other adverse childhood experiences

Hector and Stephanie

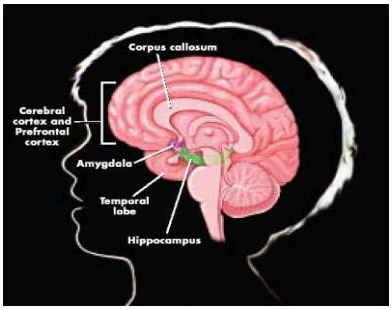
- Let's meet two children who have been exposed to domestic violence in their family
- How do you think they've been affected by DV?
- A note about self-care and viewing

Part II

Trauma responses in children and teens affected by DV

Brain, Body, and Stress Response Systems

Impact of traumatic stress on the developing brain



Fear Response is Turned "ON"

- Lowers stress threshold over time
- Chronic hyperarousal and threat perception
- Increased levels of stress hormones
- Effects cognitive functioning, self-regulation, and immune system

Physiology of Stress Response

- Shifts the body's priorities
- Puts planning, learning, and future-oriented responses on hold
- Focuses on support of vigilance, focused attention, increased muscle tone and heart rate

The Stress Response: Primary Response Options

Hyperarousal
- Flight
- Fight

Dissociation
- Freeze
- Numbing out
- Surrender

Name some traumatic stress responses that Hector and Stephanie shared in their story

Posttraumatic Stress Symptoms or Posttraumatic Stress Disorder (PTSD)

In Children & Adults:
- Hyperarousal
- Re-experiencing
- Numbing and Avoidance

In Young Children :
- New fears
- Aggression
- Loss of recent developmental achievements

Hyperarousal

Examples…..
- Body-based responses…jittery, butterflies in stomach, heart racing
- Crying, yelling, cursing, screaming, tantrums
- Hitting and aggression towards others

Re-experiencing

Examples…..
- Intrusion of visual images, flashbacks
- Talking about what happened over and over
- Can't stop thoughts about what happened
- Nightmares
- Posttraumatic play (repetitive reenactment)
- Body-based sensations

Numbing and Avoidance

Examples….
- Avoiding places, people, things that are trauma reminders
- Constriction of feelings
- Dissociation – losing touch with current surroundings

What are trauma triggers and reminders?

- More about Allison, age 3 ½…..the story continues during the family's stay in shelter
- What might be some trauma reminders for Stephanie related to the event that Hector tells?

Trauma-related symptoms and responses are developmentally-based

Children's responses need to be understood in the context of their experiences

Is this a child with ADHD, who can't sit still and concentrate in school?
or
Is he showing hyperarousal symptoms from trauma exposure?

Now let's share some examples of trauma-related symptoms and responses you've noticed that may be affecting the children and parents that you work with

Questions for Discussion

1. What do you find is most challenging for parents in responding to their children?
2. What are your own challenges in providing support to parents and their children?

Part III

Practical Strategies and Tools for Supporting Parents:

Promoting Healing and Resilience

"**We each seek to know that we are held in the mind and heart of another**."

Diana Fosha

Attachment relationships scaffold how we develop, who we become

- Parents can be the single most important resource for their children's recovery from the effects of traumatic stress

Lieberman and Van Horn (2008)

What protects children from the impact of traumatic experiences and promotes healing?

- Presence of loving relationship with parent or other caregiver invested in the child's well-being over time
- Child's innate and psychological characteristics
- Stability and responsiveness of systems that interact directly with the child
- Availability of social supports and intervention services for children and parents or other caregivers

Healing from exposure to interpersonal violence begins with a sense of safety, re-connection, and hope within a trustworthy relationship…….

What challenges might arise for parents and children affected by DV?

For their relationship?

For their relationships with us?

Holding Hope and Faith

"We trust in each parent's positive intentionality: their built in desire to do the best they can for their baby."

K. Hoffman, 2011, Circle of Security Parenting

Resilience

- Adaptation that results in positive outcomes *in spite of* serious threat or adverse circumstances
- Children and adults can overcome adverse circumstances and lead healthy, productive lives
- It's "ordinary magic" (Masten, 2001)
- However….the systems that support recovery are the very systems that are most vulnerable to chronic trauma

Promoting Resiliency

- Providing information about the traumatic effects of DV helps to reduce sense of shame, blame, and guilt
  - **Behavior has meaning**
- Providing developmental guidance about how trauma may affect behavior and temporarily lead to regression and difficulty mastering age-typical tasks
  - **Children want to please their parents!**

Promoting Resiliency

- Acknowledging strengths and accessing inner courage
- Evoking positive memories of being loved and cared for in the past
  - How this worked for Laura and her daughter, Allison
- Helping parent and child to enjoy each other
- Fostering sense of competence in parenting
  - Noticing and building on positive interactions

Promoting Resiliency

- Warmth
- Praise that explains what the child did well
- Scaffolding
- Emotion coaching
- Reflective functioning

What do we mean by parent's capacity for reflective functioning?

Helping parents reflect on their children's needs

- Being able to stand back and understand the child's state of mind, feelings, needs as separate from the parent's state of mind…

Self-Regulation

- Information about traumatic stress responses
- Normalizing what happens to us
- Offering ways to reduce stress responses, self-soothe, relax and re-regulate when hyperaroused

Practical Strategies

- Deep breathing
  - Let's practice together….
- Progressive Muscle Relaxation
- Positive visualizations and self-affirmations
- Drawing a safe place
- Carrying a token, talisman

Other tips….

- Timing and practice is important
- Can be used as a parent-child activity

Creating Safety

- Physical and psychological safety
- Importance of daily routines and rituals (e.g. meals, story or prayer at bedtime)
- Support parent to acknowledge the effects on self and children
- Safe "space" to talk about what they experienced, feelings, worries, concerns

"What's shareable is bearable"

Daniel Siegel

"It's not your fault"

- Children tend to blame themselves
  - Why it happened
  - Why we left home
- Sometimes children "identify with the aggressor"
  - To feel stronger, safer, have more control
- Violence is wrong and abusers are responsible for their actions

"Being with"

- "Being present" to support the parent without blame or judgment
- Being a container of strong emotions and responses
- Reflecting feeling states without expectations of immediate action or change
- Taking cues from the parent or primary caregiver to support their efforts (How can I be helpful to you right now? What's worked well in the past?)
- Offering hope and perspective

It's a parallel process

- When you can "be with" the parent…
- The parent experiences what it's like to be "held" and this helps support the parent to "be with" and contain strong feelings in their child during times of need

"Having someone here with me in this bad feeling allows me a way out of feeling bad." K. Hoffman

Strengthening and Repairing the Relationship in the Wake of DV

- Attachment relationship may be altered by DV
- Parent and child may serve as traumatic reminders for each other and misunderstand the other's intentions
- Accessing strengths and addressing vulnerabilities in the relationship
- Expanding the parent's capacity for reflective functioning

Lieberman and Van Horn (2008)

Ongoing Risks to Children in Contact: Post-Separation

- Contact with DV perpetrator can be re-traumatizing
- Use of the children as "weapons" against victimized parent; continue to undermine authority of victimized parent
- Use of children to monitor DV survivor's whereabouts and new relationships
- Neglect or abuse
- Violating orders of protection
- Ongoing threats to abduct, take custody (or actions)
- Making false reports against non-offending parent to CPS
- Threats to kill DV survivor and/or children

Bancroft (2004)

Children's Relationships with the Abusive Parent

- Children are torn between loyalty to their parents
- Children may have mixed feelings about their parents, including love, fear, and anger, towards the parent who is/was abusive
- Children may identify with the abusive parent's aggressive behavior to feel less vulnerable
- Children may model themselves after the abusive parent
- Children may know (or not) that the violence is wrong and that abusers are responsible for their actions

Supporting Custodial Parents to Help their Children with Post-Separation Contact

- Preparing for visits, when possible
  - Safety planning (as appropriate or needed)
  - Keeping parent "with you" – token
- Being open to listen to and support the child's range of feelings (good & bad) without criticizing their other parent
- Helping custodial parents to anticipate how to cope with aftermath of visits – authority undermined again, feeling re-traumatized, entrapped, etc. – and at the same time be empathic to their children's needs
- Observing or hearing about situations that are potentially unsafe and weighing options for court or CPS involvement

Linking to Community Resources and Services

Making referrals to the Early Intervention system

- Birth to age 3
- Children whose development is at risk
- Assessment, services, and linkage to therapeutic pre-K system for remediation
- Parent/caregiver responses

Making Referrals for Mental Health Services: Children and Teens

- Consult and partner with parent
- Criteria for referral:
  - Child's or teen's behavior is self-endangering
  - Child frequently engages in posttraumatic play
  - Child's current functioning is severely impaired
  - Child's behavior indicates or s/he discloses prior abuse experience (including child sexual abuse)
- Linkage/relationship with community providers who
  - Are DV-sensitive
  - Have experience in trauma-informed assessment and evidence-supported trauma treatment interventions with children and their parents

Tips on Supporting Children and Youth Exposed to Domestic Violence

What you might see &
What you can do

Young Children

- Help parent to understand child's anxiety about separation, fears, and to tolerate young child's need to stay close
- Parent can give something of theirs to the child during separations to "keep her close"
- Establish routines and rituals (meals, naps, bedtime)
- Talk about the "schedule" for the day and what happens when
- Give choices
- Provide reassurance – but not too much information
- Put words to the child's feelings
- Identify trauma reminders and adaptive ways to cope

School Age Children

- Same strategies as used with younger children but tailored to their developmental capacities
- Offer reassurances about parent and helper working together to keep the family safe
- Encourage expression of feelings through words, play, or drawing
- Answer questions truthfully and simply!

Teens

- Help parents to understand adolescents'need for growing autonomy and effects of DV and struggles with separating
- Listen openly to the other's point of view
- Provide a non-judgmental "space" to communicate feelings and concerns
- Encourage parents to establish limits and discipline (not too strict and not too lax)
- Help teens find ways to make meaning of their experiences through creative arts and by giving back to others

Helpful for All Ages

- Helping the parent to help the child with feelings and behavior related to the trauma experience
  - Use of more adaptive coping strategies and ways to manage strong feelings and responses
- Helping parents and children recognize and cope with trauma reactions and find ways to avoid being triggered (when possible)
- Strengthening the parent-child relationship in the wake of DV and other trauma

Questions, challenges, issues and reflections

NATIONAL Center on Domestic Violence, Trauma & Mental Health

Susan Blumenfeld, MSW, LCSW

29 E. Madison St., Suite 1750
Chicago, IL 60602
P: 312-726-7020, ext 15
TTY: 312-726-4110
www.nationalcenterdvtraumamh.org
sblumenfeld@dvmhpi.org

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