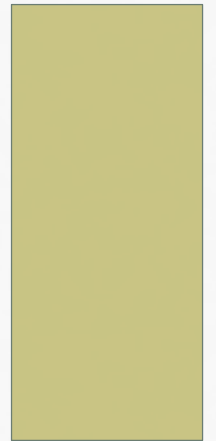


TRAUMA AND IT'S IMPACT

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MAIN TYPES OF TRAUMA

- Sexual Abuse
- Physical Abuse
- Neglect

SEXUAL ABUSE

- One in four girls
- One in seven boys
- Two out of three adults abused as children do not disclose abuse in childhood
- Many keep abuse a secret often never telling
- Feel they may be blamed or not believed
- Love their abuser

SEXUAL ABUSE CONTINUED

- Have been threatened
- Made to feel they were complicit in their abuse
- May never disclose or disclose over time
- May recant
- May deny abuse ever happened
- Non-offending parent/caregiver likely to feel angry, upset, guilty or may not want to believe their child was a victim

PHYSICAL ABUSE

- Second most common form of maltreatment
- Children can develop traumatic stress as a result
- Puts children at risk of depression/anxiety
- Linked to poor physical, emotional and mental development

NEGLECT

- The withholding of care, food, clothing, shelter, medical/mental health treatment and prescribed medications
- Most common type of abuse reported to child welfare authorities
- Exposure to dangerous environments
- Leaving a child in the care of someone incapable of caring for the child

NEGLECT CONTINUED

- Abandoning or putting a child out of the home
- Keeping a child from school
- Inadequate or poor supervision

OTHER TYPES OF TRAUMA

- Exposure to community violence
- Complex trauma
- Exposure to domestic violence
- Early childhood trauma
- Medical trauma
- Natural disasters
- Refugee trauma

TYPES OF TRAUMA CONTINUED

- School violence
- Terrorism
- Traumatic grief

COMPLEX TRAUMA

- Child's exposure to multiple and/or prolonged traumatic events & impact of this exposure on development
- May include physical maltreatment, sexual abuse, neglect, and/or exposure to domestic violence
- Results in loss of safety, direction and ability to detect/respond to danger cues

COMPLEX TRAUMA CONTINUED

- Often sets off a chain of events leading to subsequent or repeated trauma exposure in adolescence and adulthood.

PHYSICAL/BEHAVIORAL INDICATORS OF SEXUAL ABUSE

- Sleep disturbance
- Sexual acting out
- Aggressive behavior
- Pain associated with urination/bowel movements
- Regressive behavior
- Change in appetite

PHYSICAL/BEHAVIORAL INDICATORS CONTINUED

- Excessive fear/panic
- Health problems
- Reluctance to be alone w/ a certain person
- Self harming behaviors
- Emotional withdrawal

POSSIBLE SIGNS/INDICATORS OF PHYSICAL ABUSE

Visible signs

- Unexplained or frequent bone fractures
- Bruising/black eyes
- Human bite marks
- Burns on the arms, legs, or around genitalia
- Unexplained lacerations or marks around the wrists or ankles

SIGNS/INDICATORS PHYSICAL ABUSE CONTINUED

Behavioral Signs

- Depression/withdrawal
- Inconsistent explanations of injuries
- Unusual shyness/avoiding eye contact w/
older adults/children
- Excessive fear of caretakers

SIGNS/INDICATORS PHYSICAL ABUSE CONTINUED

- Anti-social behavior (older kids)
- Watchful/suspicious/ on-edge
- Expresses reluctance to go where abuse is taking place

NEGLECT SIGNS/SYMPTOMS

- Poor hygiene
- Lack of supplies/clothing to meet needs
- Taking food or money without permission or eating a lot in one sitting
- Poor record of school attendance
- Lack of appropriate attention for medical, dental or psychological problems
- Emotional swings that are inappropriate

DISCLOSING ABUSE

- *Disclosure* is when a child tells another person that he or she has been abused
- Disclosure can be a scary and difficult process
- Some children who have been abused may take weeks, months, or even years to disclose
- Many children never tell anyone

DISCLOSING ABUSE CONTINUED

- Girls are more likely to disclose than boys
- School-aged children tend to tell a caregiver
- Adolescents are more likely to tell friends
- Very young children tend to accidentally reveal abuse

DISCLOSING ABUSE CONTINUED

Reasons for Reluctance to Tell

- Fear the abuser may hurt them or their families
- Fear that they will not be believed
- Worry that their parents will be upset or angry

DISCLOSING ABUSE CONTINUED

- Fear that disclosing will disrupt or separate the family, especially if the perpetrator is a family member or friend
- Fear of removal

PARENTAL RESPONSE TO ABUSE

- React in a calm and supportive manner
- Believe your child
- Get support from a friend you trust
- Get help for your child
- Get help for yourself

TRAUMA INFORMED CARE

- TF-CBT (Trauma Focused Cognitive Behavioral Therapy)
- Time limited (12-18 sessions)
- Focuses on trauma and its impact
- Research demonstrates success rate is 85%

TRAUMA INFORMED CARE

- Structured approach designed around child's interests
- PRACTICE Components
 - psycho-education, relaxation strategies, affect expression/modulation, cognitive restructuring feelings, trauma narrative, in vivo exposure, conjoint parent/child sessions, enhancing safety

TRAUMA RESOURCES

- www.tfcbt.musc.edu
- www.nctsn.org
- www.nationalchildrensalliance.org