

REACH

Resource • Education • Advocacy • Crisis Intervention • Hope

Aspiranet and Kern County Adoption Support Program



Hello, REACH families!

While the holidays are traditionally considered a time of joy and happiness, parents may also have seen an increase in negative behaviors with their children. For this reason, this quarter we are focusing on Trauma/Developmental Perspectives and how trauma affects a child's development and behavior. When we understand the survival function behind the behavior of traumatized children, we can respond more patiently and effectively. As a parent of a child, or children, who have suffered attachment trauma, you face unique challenges when helping them adapt, survive, and thrive. It is essential to understand that attachment is biological; it is the foundation of our neurological, emotional, behavioral, cognitive, social, and physical well-being. Early and chronic trauma disrupts attachment and affects an infant's ability to establish the necessary foundation.

Trauma affects how a child interacts and reacts to others, how they experience emotions, regulate themselves, and adapt. It affects how they remember, meet their own needs, navigate through the stages of development, and understand where they stand within the world around them. As parents, once we understand the impact of attachment trauma on our child's development, we become attuned to respond more effectively to our children's emotional needs.

Early, chronic maltreatment is a profound source of injury because the trauma is to the attachment anchor (early life caregivers/parents). Considering the role attachment experiences play in our development, any significant disruption to the link may have many lasting effects. When parenting a child who has experienced early and chronic trauma, we need to understand that they are survivors, resiliently attempting to adapt to an unresponsive, threatening, and unpredictable world. Knowing what is truly happening to a developing brain and body provides us, as parents, the necessary perspective and appreciation to interact effectively with our children. Perspective gives us hope because we can see the child's behavior in a meaningful context. Once we begin to fathom human development's complexities, we can appreciate our adaptability and drive to survive.

When you find yourself struggling with behaviors, ask yourself, "My child has a story, and that story is impacting those of us who love them- how much of their story do I truly know?" "What life events have they possibly experienced that put them into survival mode?" "How do I help them feel secure and safe?"

Take some time as you read through the REACH newsletter to think about your child's early experiences, how those experiences are "showing up" now, and what you can do to help them on their journey to safety, security, attachment, and love. Finally, if you have made mistakes in your response to their "outbursts," have mercy and kindness with yourself. You are learning, and you will better understand how to respond the next time.

Sincerely,

The REACH Team

**Kern County
Winter 2023**

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How Early Childhood Trauma Is Unique

By Tara Soria, MA

Traumatic events have a profound sensory impact on young children. Their sense of safety may be shattered by frightening visual stimuli, loud noises, violent movements, and other sensations associated with an unpredictable, frightening event. The frightening images tend to recur in the form of nightmares, new fears, actions, or play that reenact the event. Lacking an accurate understanding of the relationship between cause and effect, young children believe that their thoughts, wishes, and fears have the power to become real and can make things happen. Young children are less able to anticipate danger or to know how to keep themselves safe, and so are particularly vulnerable to the effects of exposure to trauma. A 2-year-old who witnesses a traumatic event, such as his mother being battered, may interpret it quite differently from the way a 5-year-old or an 11-year-old would. Children may blame themselves or their parents for not preventing a frightening event or for not being able to change its outcome. These misconceptions of reality compound the negative impact of traumatic effects on children's development.

Young children who experience trauma are at particular risk because their rapidly developing brains are very vulnerable. Early childhood trauma has been associated with reduced size of the brain cortex. This area is responsible for many complex functions including memory, attention, perceptual awareness, thinking, language, and consciousness. These

changes may affect IQ and the ability to regulate emotions, and the child may become more fearful and may not feel as safe or as protected.

Young children depend exclusively on parents/caregivers for survival and protection—both physical and emotional. When trauma also impacts the parent/caregiver, the relationship between that person and the child may be strongly affected. Without the support of a trusted parent/caregiver to help them regulate their strong emotions, children may experience overwhelming stress, with little ability to effectively communicate what they feel or need. They often develop symptoms that parents/caregivers don't understand and may display uncharacteristic behaviors to which adults may not know how to appropriately respond.

Symptoms and Behaviors

As with older children, young children experience both behavioral and physiological symptoms associated with trauma. Unlike older children, young children cannot express in words whether they feel afraid, overwhelmed, or helpless. Young children suffering from traumatic stress symptoms generally have difficulty regulating their behaviors and emotions. They may be clingy and fearful of new situations, easily frightened, difficult to console, and/or aggressive and impulsive. They may also have difficulty sleeping, lose recently acquired developmental skills, and show regression in functioning and behavior.

Children aged 0-2 exposed to trauma may:	Children aged 3-6 exposed to trauma may:
<ul style="list-style-type: none"> • Demonstrate poor verbal skills • Exhibit memory problems • Scream or cry excessively • Have poor appetite, low weight, or digestive problems 	<ul style="list-style-type: none"> • Have difficulties focusing or learning in school • Develop learning disabilities • Show poor skill development • Act out in social situations • Imitate the abusive/traumatic event • Be verbally abusive • Be unable to trust others or make friends • Believe they are to blame for the traumatic event • Lack self-confidence • Experience stomach aches or headaches

Protective Factors: Enhancing Resilience

The effects of traumatic experiences on young children are sobering, but not all children are affected in the same way, nor to the same degree. Children and families possess competencies, psychological resources, and resilience--often even in the face of significant trauma--that can protect them from long-term harm. Research on resilience in children demonstrates that an essential protective factor is the reliable presence of a positive, caring, and protective

parent or caregiver, who can help shield children against adverse experiences. They can be a consistent resource for their children, encouraging them to talk about their experiences, and they can provide reassurance to their children that the adults in their lives are working to keep them safe.

National Child Traumatic Stress Network. (n.d.). Trauma types: www.nctsn.org/what-is-child-trauma/trauma-types.



Dr. Dan Siegel's "Window of Tolerance"

By Fernando Aquino, MSW



During infancy, children who receive care, attention, and attuned parenting have their needs met, creating a healthy regulation system and attachment to their parents. This attunement creates a roadmap for children later in life that formulates how they regulate their emotions. Children who are unable to receive proper co-regulation and attunement with parents during infancy do not have the same roadmap or capacity to regulate efficiently. They have to learn the skill of self-regulation.

The term "window of tolerance" was introduced by Dr. Dan Siegel through his many publications on secure attachment. The "window of tolerance" is used to depict a regulated nervous system, allowing for "normal brain and body reactions." When we experience pain, hurt, anxiety, or anger it "brings us closer to the edges of the window of tolerance." This reaction can also affect our mood causing a person to feel tired, exhausted, sad, and even shut down.

Figure 1 shows how traumatic events (red line) can throw our nervous system into a state of hyperarousal and hypoarousal. The blue line in the middle demonstrates the emotions fluctuating within the optimal arousal zone. The optimal arousal zone is how we function daily without being

thrown off or overtaken by emotions; this allows us to make clear decisions. Figure 2 is an activity utilized to demonstrate another way to view the "window of tolerance," called "flipping your lid." If we close our fingers around our thumb, the thumb in the center is our downstairs brain (limbic stress response). The fingers we close over our thumb are our upstairs/thinking part of the brain (the cortex). Throughout the day, we may feel upset or go through emotions, but we can manage them by staying within our "optimal zone." However, sometimes we get so upset we are unable to manage our emotions. The result is we are thrown out of our optimal zone and we "flip our lid." The fingers rise (thinking brain) and we lose connection to our downstairs brain.

Learning how to bring ourselves back to the optimal zone can be challenging, but is important. This skill is learned and often needs to be reinforced. Some techniques include breathing through a straw, warm water, weighted blankets, smelling essential oils, or chewing crunchy food. Practice these strategies and find out what works for you.

<https://www.attachment-and-trauma-treatment-centre-for-healing.com/blogs/understanding-and-working-with-the-window-of-tolerance>

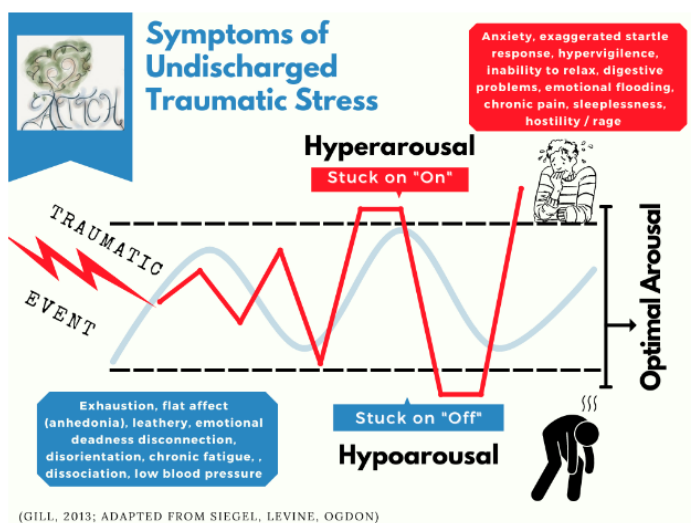


Figure 1: Attachment and Trauma Center for Healing

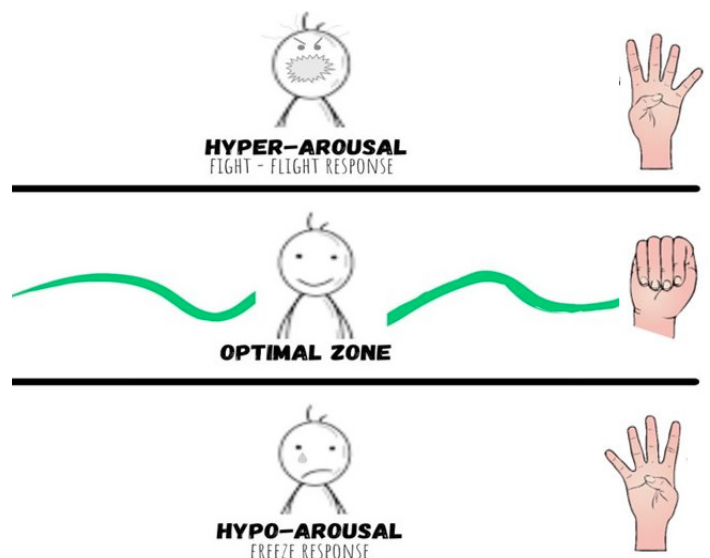


Figure 2: APT-Section 3 "Flipping your lid"

Activity: Gentle and Kind

By Beth Hurlbert, LMFT

A lot of children who come from trauma do not know how to be gentle and kind. Their behaviors may be intentional when they want to hurt someone, or unintentional when they don't know their strength or they are dysregulated. Oftentimes, these behaviors are a result of what a child experiences at a very young age. The great news is that we can work towards changing these behaviors through fun activities with our children, such as the Gentle and Kind activity.

Start by explaining to your child that it is important we are gentle and kind to ourselves and others with our words and our actions.

One way to demonstrate the difference between gentle and kind and not gentle and kind is by having your child give you a hard high five, a medium-strength high five, and a soft high five. Talk about how each feels and which you prefer. You can also use hugs (tight, medium, light), voices (yell, normal, whisper), or facial expressions (angry, neutral, sad/laughing, giggle, smile).

Book Review: *Maybe Tomorrow?* By Charlotte Agell

by Griselda Santillan Mejia, MA

Maybe Tomorrow? is a short story written for children but could also be helpful for adults. It's a well-written story about loss, healing, and the importance of friendship while navigating difficult times. The storyline explores loss and empowers empathy, friendship, and kindness. It's a great story to help children and adults understand the grief that comes from losing a loved one, whether it's a family member, friend, or pet. The story begins with Elba, a pink hippopotamus who is weighed down by a heavy black block representing depression, anxiety, and sadness; the block greatly limits what she can do as it holds her down. The use of the black block makes these emotions much easier for young children to interpret and understand how they can sometimes hold us back from feeling happiness or doing what we love. Norris, an alligator, then enters her life. He is cheerful and outgoing while still being a very kind friend who never leaves Elba's side during the difficult time she is experiencing. In his attempt to cheer her up, he invites her to join him to do several activities, which Elba refuses at first. Through this, he continues to "just be with her" even if it's just sitting with her in silence and providing companionship. He is patient but still persistent in encouraging Elba to join him so she can "cheer up a bit." After several attempts, Elba finally feels ready to join him on a trip to the beach. As they spend more time together and Elba feels comfortable,

Next, find a stuffed animal and show your child what it looks like to play rough with the stuffed animal (swing it around, pull its tail, poke its eyes). Ask if the animal would like to be treated like this? Why or why not? What might the animal do when they are treated in a mean way (bite, scratch, runaway)?

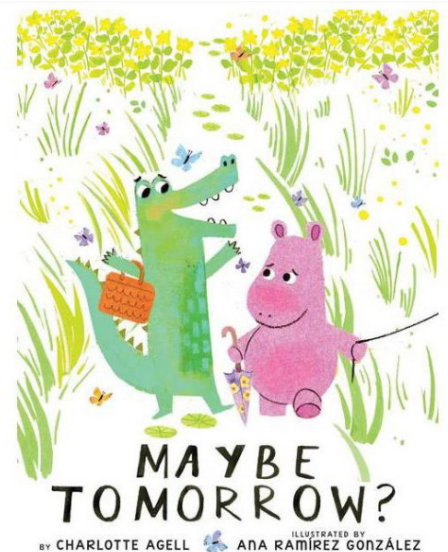
Then take the stuffed animal and show your child what it is to be gentle and kind (pet the animal, talk softly and kindly, cuddle nicely). Again, ask the question, would the animal like to be treated this way? Why or why not? What might an animal do when they are treated this way (cuddles, stays, licks)? Don't forget to praise the children when they can do the Gentle and Kind activity.

Do these activities often with your child to reinforce the skills you are teaching them. Have children practice it with each other while you supervise. The more these skills are practiced and used, the more they will become muscle memory for your child, and you will just need to remind them to be gentle and kind to change their behaviors.

Information from: Karyn Purvis Institute of Child Development

she begins sharing with Norris about her loss. Norris is kind, patient, and comforting to Elba. Norris' unconditional support and companionship through the difficult time Elba was experiencing helps her "big black block (grief)" become smaller and much more manageable. This story offers hope that with support, patience, and kindness, those who are experiencing grief can cope with it a little better. It shines a light on the hardship of coping with heavy burdens and the importance of support.

Maybe Tomorrow? Can be heard in audio form here: <https://www.youtube.com/watch?v=5RO1prap1wQ>



Support Groups & Events

January

- 19 Parent Café**
10:00-11:30am - ZOOM
- 24 Parent Support Group**
6:00-7:30pm - In Person
- 25 Parent Support Group in Spanish**
9:30-11:30am - ZOOM

February

- 16 Parent Café**
10:00-11:30am - ZOOM
- 22 Parent Support Group in Spanish**
9:30-11:30am - ZOOM
- 28 Parent Support Group**
6:00-7:30pm - In Person

March

- 16 Parent Café**
10:00-11:30am - ZOOM
- 22 Parent Support Group in Spanish**
9:30-11:30am - ZOOM
- 28 Parent Support Group**
6:00-7:30pm - In Person



REACH Support Groups for Parents

REACH Parent Support Group

6:00pm-7:30pm - In Person

Designed for adults thinking about adoption through foster care, families awaiting adoptive placement, and new and experienced resource and adoptive parents. Training hours provided. The Adoption Support Group is offered on the fourth Tuesday of each month, 6:00-7:30pm. Please join us to share your family's challenges and triumphs. To register, email Carrie Ontiveros at contiveros@aspiranet.org.

Parent Café

10:00am-11:30am via Zoom

Based on the Five Protective Factors, Parent Cafe provides an opportunity for parents to explore their strengths and learn from each other's experiences. Training hours provided. Parent Café is offered on the third Thursday of each month, 10:00-11:30am via Zoom. To register for Parent Café, email Carrie Ontiveros at contiveros@aspiranet.org, and a link to the meeting will be emailed to you.

REACH Parent Support Group in Spanish

9:30am-11:30am via Zoom

Este grupo está diseñado para adultos que piensan en la adopción, padres que esperan colocación adoptiva, y padres de niños adoptados. Horas de entrenamiento impartidas. Los enlaces de Zoom y los recordatorios se enviarán mensualmente. El Grupo de Apoyo para Padres de REACH en Español se ven en el cuarto miércoles del mes. Para registrarse, comuníquese con Carrie Ontiveros at contiveros@aspiranet.org, y se le enviara por correo electrónico un enlace a la reunión.

Bakersfield College Foster & Kinship Care Program

Bakersfield College Foster and Kinship Care Program offers training of interest to foster and adoptive parents at no charge.

For a complete list of classes, visit the FKCE website at

<https://www.bakersfieldcollege.edu/FKCE/schedules#rfat>

Register for classes by calling the registration line 661-319-1836 or BC Program Manager at 661.395.4737



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REACH and Kern County Adoption Support Services

Resource: We provide 1) telephone support and referral to local services 2) referral to local adoption related community trainings 3) linkage to local therapists with experience working with adoptive families 4) lending library and website access 5) quarterly newsletter which includes book reviews, and relevant adoption related information.

Education: Educational support groups and meetings are regularly held and offer a variety of topics pertinent to adoption. In addition, access to the lending library and website offer many opportunities to learn more about adoption and the impact of adoption on all members of the adoption constellation (adoptive parents, adoptees and birth family).

Advocacy: We are here to help navigate common issues facing adoptive families. We assist adoptive parents with advocating for the assistance needed in working with educational, legislative and community partners to best meet their children's needs.

Crisis Intervention/Case Management: Participants are eligible to receive short-term therapeutic services, free of charge, by master's level social workers who are trained and experienced in adoption-related issues. Families are also eligible to receive in-home case management services as needed.

Hope: We utilize our agency values of Respect, Integrity, Courage and Hope (RICH) to guide our work with adoptive families. Our goal is to promote safe, healthy and stable adoptive families through access to our services.