


OPTUMHealth
Education



Complex Trauma in Pediatrics: Long-term Impact and Treatment Strategies
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10:00 am – 11:00 am CDT

WHAT IS TRAUMA?

- DEFINITION
 - Events or circumstances experienced by an individual as physically and/or emotionally harmful and/or life threatening which result in adverse effects on the individual's functioning and well-being
 - Substance Abuse and Mental Health Services Administration

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WHAT IS CHILDHOOD TRAUMA?

- A traumatic event is a frightening, dangerous and/or violent event that poses a threat to a child's life or bodily integrity and can initiate strong emotions and physical reactions that can persist long after the event
- Children who suffer from child traumatic stress have been exposed to one or more traumas over the course of their lives and they develop reactions that persist and affect their daily living
 - The National Child Traumatic Stress Network
 - www.nctsn.org

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WHAT IS CHILDHOOD TRAUMA?

- The traumatic events are severe and pervasive
- The trauma exposure often begins in early life and disrupts child development
the formation of a sense of self
Interferes with the ability to form secure attachment bonds
 - Child Trauma Training Network
 - www.ctntraumatraining.org

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COMPLEX TRAUMA

- Experience multiple traumatic events
- Within the caregiving system
- Caregivers are the sources of terror rather than safety
- Occurs early in life- ages (0-3)

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COMPLEX TRAUMA

- Parents usually help their children overcome the experience of non-abuse acute trauma
 - Believing and validating child's experience
 - Tolerating child's affect
 - Managing own emotional reactions

Cook, A., Spinazzola, J., Ford, J., Lanktree, C., Blaustein, M., Cloitre, M., DeRosa, R., Hubbard, R., Kagan, R., Liautaud, J., Mallah, K., Olafson, E., & van der Kolk, B. (2005). Complex trauma in children and adolescents. *Psychiatric Annals*, 35(5), 390-398

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COMPLEX TRAUMA

- Parents can also be the source of trauma
 - Parents who are the sources of trauma or who are traumatized themselves cannot perform these functions.
 - Parental trauma can be function of domestic or external events, present or historical.

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COMPLEX TRAUMA

- Exposure to traumatic events is a common experience in childhood
 - More than 60% of children are exposed by age 16
 - More than 30% are exposed to multiple events
- "Association of Childhood Trauma Exposure with Adult Psychiatric Disorders and Functional Outcomes" Copeland, et.al. JAMA 1/2018

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NORMAL LIFE. BAD THINGS

THE NATIONAL CHILD STRESS TRAUMATIC STRESS NETWORK
WHAT IS COMPLEX TRAUMA? 2017



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PTSD


THE NATIONAL CHILD STRESS TRAUMATIC STRESS NETWORK
WHAT IS COMPLEX TRAUMA? 2017



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COMPLEX TRAUMA

THE NATIONAL CHILD STRESS TRAUMATIC STRESS NETWORK
WHAT IS COMPLEX TRAUMA? 2017



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EARLY BRAIN DEVELOPMENT

- Considerable brain development occurs from ages 0-3 in the form of development of connections and pathways in the brain
- Most of the development in the right brain is through non-verbal experiences
- The brain develops in use-dependent ways

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EARLY BRAIN DEVELOPMENT

- EPIGENETICS
 - The study of the mechanism that turns on and off the expression of genes without altering the DNA sequence
- Factors include
 - Age
 - Nutritional habits
 - Psychological stress
 - Physical activity
 - Work habits
 - Substance abuse

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EARLY BRAIN DEVELOPMENT AND TRAUMA

- Trauma can have serious consequences on the normal development of a child's nervous system.
- Trauma results in:
 - Over responsiveness of brain centers/pathways responsible for arousal and vigilance
 - Underdevelopment of brain centers/pathways responsible for cognitive processing
 - Overuse of dissociation/freezing (disconnection from emotions and/or cognitions)

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DEVELOPMENTAL IMPACT

Emotional Brain

In Resnik RM (1988): The Mind. Plenum, New York

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COMPLEX TRAUMA AND DEVELOPMENT

- Complex trauma has a pervasive and potentially life-long developmental impact
- Multiple domains of impairment identified

Cook, A. Blaustein, M., Spinazzola, J., & van der Kolk, B. (Eds.) (2003). *Complex trauma in children and adolescents*. National Child Traumatic Stress Network. <http://www.NCTSN.org>

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DEVELOPMENTAL IMPACT

- ATTACHMENT
 - The world is experienced as uncertain, unpredictable, and dangerous.
 - Others are perceived as not able/willing to meet basic emotional/relational, and physical needs.
 - Social isolation with difficulty relating to and empathizing with others.
 - Testing all relationships to see whether new adults will be different from the ones who hurt them.

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DEVELOPMENTAL IMPACT

- BIOLOGY
 - Chronic physiological arousal that reflects the perception of chronic danger.
 - Problems with movement and sensation, including hypersensitivity to physical contact and insensitivity to pain.
 - Unexplained physical symptoms
 - Long-term health risks.

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DEVELOPMENTAL IMPACT

- **AFFECT REGULATION**
 - Difficulty knowing and describing feelings and internal states
 - Highly reactive to small events
 - Difficulty regulating emotions or calming themselves down

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DEVELOPMENTAL IMPACT

- **BEHAVIOR CONTROL**
 - Poor impulse control
 - Self-destructive behavior, and aggression towards others
 - Maladaptive self-soothing techniques (e.g., self-cutting)

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DEVELOPMENTAL IMPACT

- **DISSOCIATION**
 - Experience of detachment or depersonalization, as if they are “observing” something happening to them that is unreal.
 - Appear “spacey” or disconnected from events.

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DEVELOPMENTAL IMPACT

- **COGNITION**
 - Problems focusing on and completing tasks
 - Trouble planning for and anticipating future events
 - Learning difficulties and problems with language development

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DEVELOPMENTAL IMPACT

- **SELF CONCEPT**
 - Disturbed body image
 - Low self-esteem, shame, and guilt.

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DEVELOPMENTAL IMPACT

- **SUMMARY OF THE TRAUMA IMPACT ON THE CHILD**
 - Many behaviors are "safety-seeking" (fight, flight, freeze)
 - Other behaviors reflect need-fulfillment strategies (emotional/relational needs, and physical needs)
 - The child has developmental deficits (affect management, self-concept, interpersonal skills, cognitive delays)

Blaustein, M.E., & Kinniburgh, K.M. (2010). *Treating traumatic stress in children and adolescents*. NY: The Guilford Press.

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DIAGNOSTIC CONFUSION

- Traumatic reactions can include
 - Intense and ongoing emotional upset
 - Depression and/or anxiety
 - Behavioral changes
 - Self-regulation difficulties
 - Problems relating to others or forming attachments
 - Regression or loss of previously acquired skills
 - Attention and academic difficulties
 - Nightmares
 - Difficulty sleeping and eating
 - Physical symptoms like aches and pains

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DIAGNOSTIC CONFUSION

- Reactive Attachment Disorder
- Attention Deficit Hyperactivity Disorder
- Oppositional Defiant Disorder
- PTSD
- Bipolar Disorder
- Disruptive Mood Dysregulation Disorder
- Conduct Disorder
- These do not capture the full extent of the developmental impact.

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LONG TERM CONSEQUENCES

- Absent more positive coping strategies, may engage in high-risk or destructive coping behaviors.
- These behaviors also raise risks in later adulthood for:
 - Substance abuse
 - Depression and suicidality
 - Sexually transmitted diseases (due to high risk activity with multiple partners)
 - Heart disease, cancer, chronic lung disease, skeletal fractures, and liver disease

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ADVERSE CHILDHOOD EXPERIENCES

- **ACE STUDY**
 - Decades long and ongoing study
 - Collaboration between the Center for Disease Control and Prevention (CDC) and Kaiser Health Plan's Department of Preventative Medicine in San Diego, California

Key Concepts

- Stressful or traumatic childhood experiences (ACEs) are a common pathway to social, emotional and cognitive impairments
- ACEs disrupt neurodevelopment and can have lasting effects on brain structure and function

Felitti VJ, et al. "Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults- The Adverse Childhood Experiences (ACE) Study" AMJ Preventive Medicine 1998; 14(4)

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ADVERSE CHILDHOOD EXPERIENCES

- **BIRTH TO DEATH**
 - Adverse Childhood Experiences
 - Social, Emotional and Cognitive Impairment
 - Adoption of Health-risk Behaviors
 - Disease, Disability and Social Problems
 - Early Death

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ADVERSE CHILDHOOD EXPERIENCES

- **CHILDHOOD ABUSE**
 - EMOTIONAL
 - PHYSICAL
 - SEXUAL
- **NEGLECT**
 - EMOTIONAL
 - PHYSICAL
- **DYSFUNCTIONAL HOUSEHOLD**
 - WITNESSING DOMESTIC VIOLENCE
 - ALCOHOL OR OTHER SUBSTANCE ABUSE
 - MENTALLY ILL OR SUICIDAL HOUSEHOLD MEMBERS
 - CRIME IN THE HOME (HOUSEHOLD MEMBER IMPRISONED)
 - SEPARATION/DIVORCE

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TREATMENT

- Complex symptom pictures often not addressed in existing protocols
- Standard outpatient settings may not be the ones in which these clients are receiving services
- Currently, the recommended practice is to identify core components, based on available research

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TREATMENT

- Trauma informed care acknowledges that understanding a person's life experiences is the key to potentially improving engagement in treatment and the outcome of treatment.
- Trauma specific interventions recognize the following
 - Survivors need to be respected, informed, connected and hopeful about recovery
 - The relationship between trauma and the symptoms of trauma
 - The need to work collaboratively with survivors, family and friends

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TRAUMA INFORMED APPROACH TO THERAPY

- The trauma informed treatment program
 - REALIZES the widespread impact of trauma
 - RECOGNIZES the signs and symptoms of trauma in the client, families, staff and others
 - RESPONDS by fully integrating knowledge about trauma into policies, procedures and practices
 - Seeks to actively RESIST re-traumatization
 - SAMHSA

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TRAUMA INFORMED APPROACH TO THERAPY

- Key principles of trauma informed approach to treatment includes
 - Safety
 - Trustworthiness and transparency
 - Peer support
 - Collaboration and mutuality
 - Empowerment, voice and choice
- SAMHSA

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TREATMENT MODALITIES

- Attachment, Regulation and Competency (ARC)
- Trauma Adaptive Recovery Group Education and Therapy (TARGET)
- Structured Psychotherapy for Adolescents Responding to Chronic Stress (SPARCS)
- Strengthening Family Coping Resources (SFCR)
- Trauma Focused Cognitive Behavioral Therapy (TF-CBT)
 - Trauma Focused-CBT targets victims of acute trauma with an available supportive parent
 - Recent studies have demonstrated effectiveness in complex trauma
 - “Complex PTSD as proposed for ICD-11: Validation of a new disorder in children and adolescents and their response to Trauma Focused Cognitive Behavioral Therapy” Journal of Child Psychology and Psychiatry. Sachser, et.al. 8/2016

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TREATMENT

- ATTACHMENT, SELF-REGULATION AND COMPETENCY (ARC) TREATMENT PROCESS
 - Grounded in attachment theory and focuses on how the child’s entire system of care can become trauma informed
 - Resilience fostered through:
 - Attachment
 - Self-regulation
 - Competence

Blaustein, M.E., & Kinniburgh, K.M. (2010). *Treating traumatic stress in children and adolescents*. NY: The Guilford Press.

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TREATMENT

- ATTACHMENT AND SAFETY ISSUES
 - Caregiver management of affect
 - Attunement: accurately reading of emotional cues and responding to those rather than behaviors
 - Consistent response
 - Routines and rituals

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TREATMENT

- SELF REGULATION ISSUES
 - Affect identification
 - Modulation: learn to maintain optimal levels of arousal and expand the "comfort zone" to tolerate a range of emotional experience
 - Affect Expression: skills to share emotional experience with others to meet needs

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TREATMENT

- EXECUTIVE FUNCTION/ PROBLEM SOLVING SKILLS COMPETENCY
 - Self development and identity
 - The unique self: personal attributes, values, opinions, culture
 - The positive self: internal resources, and identification of strengths and successes
 - The coherent self: examination of self across multiple aspects of experience
 - The future self: imagine the future and explore possibilities

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TREATMENT

- Treatment Components for Integrating Fragmented Self-States
 - Identify key patterns and themes
 - Recognize them as they occur
 - Reflect and validate child's experience in the present
 - Support use of modulation strategies
 - Reflect and identify the themes
 - Identify the function of the current response
 - Differentiate past and present
 - Build capacity to recognize self-state shifts that signal fragmented responses
 - Assess present moment, identify goals, and make an active choice

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TREATMENT

- TRAUMA NARRATIVE
 - Key part of traditional trauma treatment
 - Can be used as long as the skills to manage affect are developed sufficiently
 - Trauma narratives involve
 - the story of the trauma
 - managing of the affect
 - a self-appraisal of the child's resulting beliefs, feelings, and actions
 - meaning-making
 - future plans

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