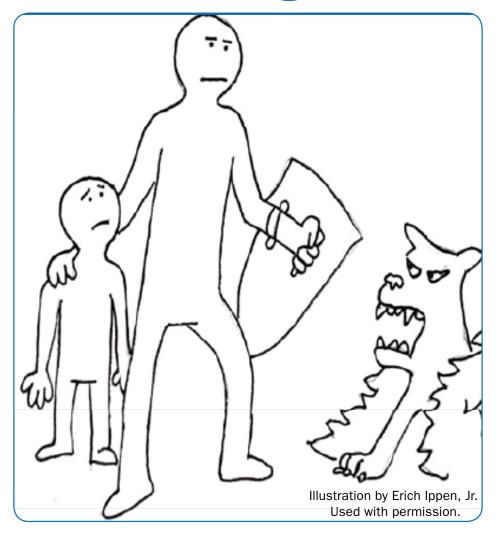
Module 4: Building a Safe Place



What You Will Need

- Module 4 PowerPoint slides 1–34
- Index cards for "What Is Safety" Group Activity
- Pens/pencils
- "My Child" Worksheet, Module 4 (Participant Handbook, p. MC-9)
- Reprint of A. M.'s story from Represent magazine (Participant Handbook, pp. 4-19 to 4-27)
- Case studies of Tommy, James, and Javier (Participant Handbook, pp. CS-9 to CS-11 and pp. CS-13 to CS-18)

 Stress Busters for Kids Worksheet (Participant Handbook, p. 4-37)

Icon Reminders



Facilitator tip



Group activity/discussion



Click to advance slide content

Facilitator Goals

- Help participants understand the difference between physical and psychological safety in children and adolescents who have experienced trauma.
- Introduce participants to the concept of the safety message and how to deliver it effectively to children and adolescents who have experienced trauma.
- Provide participants with concrete examples of—and techniques for coping with—trauma reminders.

Key Learning Objectives

- Describe the key components of a safety message and how to deliver an effective safety message to children who have experienced trauma.
- Define trauma reminders and give an example of a reminder and reaction.
- List at least three ways resource parents can help children to cope with trauma reminders.



Module 4: Building a Safe Place

Before participants arrive, write on the board (or an easel) the Big Ideas the group identified during the last module.

Greet participants as they enter the room.

Keep participants informed of the time remaining until the workshop begins.

Remind participants of basic logistical information (location of bathrooms, timing of breaks, etc.).



Start the session by thanking the participants for coming back and directing their attention to the Big Ideas from the last session. Ask the participants to share any experiences or insights they have had since the last session that relate to these Big Ideas.

Allow five to 10 minutes for discussion.



Essential Element 2

During the last module, we focused on understanding the impact that trauma can have on the children who come into our homes.

Now let's start looking at the ways in which we can help children recover and become more resilient, in particular Essential Element 2: Help your child to feel safe.

Safety is important for all children, but it is particularly crucial for children who have experienced trauma. For these children, the world has often been a harsh and unpredictable place. To heal, they need to feel safe and to believe that there are adults in their lives who can offer safety and security.



What Is Safety? (Group Activity)

According to the dictionary, "safety" is "the condition of being safe from undergoing or causing hurt, injury, or loss."

In the real world, of course, safety is a bit more complicated.



Take a couple of index cards from the middle of the table. **Think of a specific time in your own life when you felt endangered, scared, or worried.** Really try to remember what it felt like—both physically and emotionally. Write the situation or incident down on one of the cards.

Give participants a moment to think about it and to make their notes.

Now think about what it took to make you feel safe and secure again. Was it something you did? Something another person did? Going to a special place? A spiritual belief? An object? Or some combination? Write it all down on your card.

Give participants a few moments to write, then open the discussion to sharing for no longer than 10 minutes. One facilitator should lead the discussion while the other notes responses on the board or an easel and helps to monitor the room.



Safety and Trauma

The exercise we just completed shows us that:

- Physical safety is not always the same as psychological safety. You can be physically safe and not feel safe. Children—and adults—who have experienced trauma are likely to feel unsafe long after they are out of actual physical danger.
- Your child's definition of safety will not be the same as yours. Children who have experienced trauma may get comfort and a sense of safety from things we take entirely for granted—like having heat in every room of the house, or cereal in the kitchen cabinet. On the other hand, actions and activities that we consider comforting or benign—like a pat on the shoulder or a hot bath—may have dangerous overtones to a child who has been physically or sexually abused.
- To help these children feel safe, we as resource parents need to look at the world through the child's "trauma lens."

Safety and Trauma (Continued)



Children who have been through trauma may:

- Have valid fears about their own safety or the safety of loved ones
- Have difficulty trusting adults to protect them
- Be hyperaware of potential threats
- Have problems controlling their reactions to perceived threats

NCTSN ETTEL

Safety and Trauma (Continued)

Children who have been through trauma may need more control, more reassurance, and more information to feel psychologically and physically safe. Because of their traumatic experiences, these children may:

- Have valid real-life concerns about their own safety and the safety of siblings, parents, or other loved ones
- Find it difficult to trust that adults can—or will—protect them
- Be hyperaware of potential threats, including threats that may seem illogical or unreasonable to us
- 1 Have trouble controlling their reactions to any threat

Read-Aloud Quote

NCTSN Exercise

Ask for a volunteer to read the quote from the slide. If no one volunteers, a facilitator should read it aloud.

"When supper was over I saw that there were many biscuits piled high upon the bread platter, an astonishing and unbelievable sight to me. . . . I was afraid that somehow the biscuits might disappear during the night, while I was sleeping. I did not want to wake up in the morning . . . feeling hungry and knowing that there was no food in the house. So, surreptitiously I took some of the biscuits from the platter and slipped them into my pocket, not to eat, but to keep as a bulwark against any possible attack of hunger. . .

I did not break the habit of stealing and hoarding bread until my faith that food would be forthcoming at each meal had been somewhat established."

Does this sound familiar? For this author, as for many children who have experienced abuse and neglect, the presence and availability of food was directly tied to his sense of safety. Just having enough food did not immediately allow him to feel safe—he continued to need to hoard food in order to feel safe. As resource parents, it is important that we recognize the link between trauma and behaviors such as hoarding food.

Promoting Safety



- Help children get familiar with the house and neighborhood.
- Give them control over some aspects of their lives
- Set limits.
- Let them know what will happen next.
- See and appreciate them for who they are
- Help them to maintain a sense of connection and

NCTSN TOTAL

Promoting Safety

There are several ways you can help traumatized children feel psychologically safe (some of this might sound familiar to you from your previous training):

- Help them to become familiar with your home and neighborhood so these places feel less foreign.
- Give them choices and responsibilities so they can experience a sense of control over their day-to-day lives.
- Set limits so they don't feel overwhelmed or responsible for more than they can handle.
- Give them some idea of what is going to happen in their future. Children will feel safe if they have some idea of what is going to happen and how decisions affecting them will be made. How much specific information you provide will depend on the age of the child.
- See and appreciate each child as a unique and special person. Provide opportunities for children to express themselves freely. The more a child feels "known" and understood by the people around them, the less they will feel like a stranger among strangers.
- Help them maintain a sense of connection and continuity with their culture and their past (We'll be going into this in more detail in Module 6: Connections and Healing).

Give a Safety Message

- Partner with the social worker or caseworker
- Get down to the child's eye level.
- Promise to keep the child physically safe.
- Ask directly what the child needs to feel safe.

Give a Safety Message

When a child who has experienced trauma comes into your home, it's important to give an immediate assurance of safety.

- 🌖 If possible, ask the social worker who brings the child to your home to stay for an hour or so to participate in this safety message. In this way, you and the social worker are immediately seen as a team working together to keep the child safe.
- Get down to the child's eye level and use language appropriate to the child's age.
- 🍘 Promise to keep the child physically safe. Avoid making promises that are unrealistic, such as "Nothing bad will ever happen to you again," but let the child know that you will do everything you can to keep him or her safe and protected.
- Ask the child what he or she needs to feel safe.
- As you give your safety message, be sure to follow the child's lead. Don't push it if the child seems distracted, nervous, or unwilling to go into details.
- Very young children, or children who were traumatized at a very young age, literally may not have the words to tell you what they need to feel safe. But we can still let children know that we care about their needs and are ready to listen to what they have to say. Reassure the child that you are always ready to help or talk if he or she feels anxious or afraid.

Give a Safety Message (Continued) (Group Activity) Take concerns seriously: Empathize. Acknowledge that the child's feelings make sense in light of past experiences. Be reassuring and realistic about what you can do. Be honest about what you do and don't know. Help your child to express his or her concerns to other members of the child welfare tearn.

Give a Safety Message (Continued) (Group Activity)

If the child does share worries with you, take them seriously, even if they seem exaggerated or unrealistic.

- 1 Be empathetic. Let the child know that you care.
- Acknowledge that the child's feelings make sense in light of past experiences. This lets the child know that all fears and concerns are "mentionable" in your household. This can go a long way toward helping the child to feel more "normal" and less bound by secrecy.
- Be reassuring, but also be realistic about the limitations of your own power. Don't promise more than you can deliver.
- Be honest about what you do and don't know.
- If necessary, help the child to make a list of concerns for the caseworker or other members of the team. Just writing down a fear can help a child to feel more in control.

Ask the group to turn to page MC-9 of their Participant Handbook, the "My Child" Worksheet, Module 4. Ask the group to take a moment to think about the child in their worksheet.



What sort of safety message would you want to share with this child? What reassurances of physical safety can you offer? Keeping the child's age in mind, what phrasing would you use? How can you work with the caseworker to deliver this message?

Allow five to 10 minutes for questions and discussion.



Explain Rules

Household rules and routines are one of the ways we keep things running smoothly in our homes, particularly when we have several children (and a partner, and perhaps some pets) living under one roof.

Structure and routine are an important part of building a sense of security in children who have survived trauma. Explaining how your household works can keep a child from feeling adrift and out of sync with the family. But laying down dictatorial rules during the first hour (or day) that a child arrives can send a message that your home is harsh and institutional rather than safe and comforting. To help strike the right balance:

- Reep the child's history in mind. Many children with a history of trauma have lived in households that were chaotic, without rules or routines. Others may have lived in families where breaking any rule had terrible consequences. It can be helpful to start by asking the child how things were done in his or her home (when they ate supper, who did the dishes, etc.) so you can explain how—and why—things are done differently in yours.
- ① Don't overwhelm the child by telling him or her everything at once. Start with the rules he or she may need to know right away, and explain others as the need arises.
- When explaining the rules of your household, stress the positive. Let the child know that the rules are there to help protect the child, others in the household, and the household itself.
- Be flexible even as you set limits. Keep in mind that a child coming from a neglectful or abusive home may be unfamiliar with the concept of consistent rules. Let the child know that you are willing to listen and help if the child has trouble understanding or following the rules.



Be an "Emotional Container"

As we've learned, children who have been through trauma may not have developed the skills to understand, express, and manage their emotions. They may feel overwhelmed by their feelings, particularly in the face of new stresses, strange situations, and trauma reminders.

Children burdened by the negative beliefs and expectations of their Invisible Suitcases may unconsciously try to "confirm" these beliefs by acting out in ways that will provoke the responses they expect from adults.

When faced with these behaviors, the greatest gift we can give is to be an "emotional container" for the child: responding calmly and appropriately and disproving the beliefs in the child's Invisible Suitcase.

I started cursing at the foster mom. I wanted her to lose control. I figured that sconer or later she would say something that would hurt me. I wanted to hurt her first Later, I felt depressed. I knew I'd acted out of control. When I get angry I don't even realize what I do and I hurt the people around me. . . . I feel sad that I'm not good about expressing myself. I feel like a walking time bomb. I hope I can find a foster mom who can handle my anger, and help me take control of myself. —A. M.

Read-Aloud Quote

Ask for a volunteer to read the quote on the slide. If no one volunteers, one facilitator should read the slide aloud.

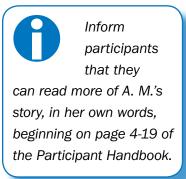
"I started cursing at the foster mom. I wanted her to lose control. I figured that sooner or later she would say something that would hurt me. I wanted to hurt her first . . .

Later I felt depressed. I knew I'd acted out of control. When I get angry I don't even realize what I do and I hurt the people around me. . .

I feel sad that I'm not good about expressing myself. I feel like a walking time bomb. I hope I can find a foster mom who can handle my anger, and help me take control of myself."

A child like A. M. is crying out for an emotional container, someone who can handle her anger or other overwhelming emotions and help her to take control of herself without hurting other people.

Only then can a child like A. M. feel safe.



Be an "Emotional Container" (Continued) • Be willing—and prepared—to tolerate strong emotional reactions. • Remember the suitcase! • Respond calmly but firmly. • Help your child identify and label the feelings beneath the outburst. • Reassure your child that it is okay to feel any and all emotions.

Be an "Emotional Container" (Continued)

To be an effective "emotional container" for your child, you will need to:

- Be willing—and prepared—to tolerate strong emotional reactions.
- Remember the Suitcase! Even though the child may be acting out with you, those behaviors are not really about you.
- Respond calmly but firmly to emotional outbursts.
- Help your child to identify and label his or her sometimes frightening feelings. Suggest and set an example of appropriate ways of expressing feelings without damaging things or lashing out at other people.

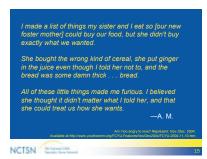
In the next module, we will go into more detail about coping with children's strong emotional reactions and the behaviors they produce.



Manage Emotional "Hot Spots"

Some situations may be particularly difficult for children who have experienced trauma, and may trigger a child to act out, struggle over control, or become emotionally upset. These emotional "hot spots" include:

- Mealtimes or other situations that involve food
- Bedtime, including getting to sleep, staying asleep, and being awakened in the morning
- Anything that involves physical boundaries, including baths, personal grooming, nudity, privacy issues, and medical exams and procedures that expose or invade the body



Read-Aloud Quote

Ask for a volunteer to read the quote. If no one volunteers, one facilitator can read it aloud.

"I made a list of things my sister and I eat so [our new foster mother] could buy our food, but she didn't buy exactly what we wanted.

She bought the wrong kind of cereal, she put ginger in the juice even though I told her not to, and the bread was some damn thick . . . bread.

All of these little things made me furious. I believed she thought it didn't matter what I told her, and that she could treat us how she wants."



Ask the participants for their thoughts and reactions to the quote—how does it make them feel?

Does A. M.'s reaction seem unreasonable? Ungrateful? Understandable? Have you run into similar reactions from children in your care?

Allow a few minutes for discussion.



Food and Meals (Group Activity)

For many traumatized children, food and the experience of being fed can be emotionally charged. When dealing with mealtimes:

- Be aware of your child's history. In your child's past, meals may have been inadequate, unpredictable, or a time when family conflicts rose to the surface. In some families, food may have been the only source of comfort. In others, children may have been forced to fend for themselves, scrounging food from dumpsters or begging from strangers.
- When possible, try to accommodate the child's food preferences. Foods that a child equates with safety and comfort may seem foreign or even unhealthy to you, but if you make sure that at least a few of them are always available, you will be sending a powerful safety message to your child.
- Set consistent mealtimes.
- 1 Involve the child in planning and preparing meals. As always, keep your child's history in mind. Although having a say in the menu can be empowering, for children who always had to fend for themselves, helping to prepare a meal may be more of a trauma reminder than a comfort. Tailor your actions to the needs and trauma history of your child.
- Keep mealtimes calm and supportive. Help the child to see mealtimes as a time when family members come together to enjoy each other and share experiences.



In what other ways can we make mealtimes "safer" for our children?

Open the floor for five minutes of suggestions and discussion.

One facilitator should lead the discussion, while another notes the suggestions on the board or easel. Take care to keep the discussion trauma-focused.



Read-Aloud Quote

Ask for a volunteer to read the quote aloud. If no one volunteers, one facilitator should read it.

"I woke up in a panic. I couldn't stay asleep. [My foster mother] came into my room. 'Honey, what's wrong?'

I couldn't even tell her how I felt. I couldn't get the words out to say what was the matter."



Sleep and Bedtime (Group Activity)

Like meals, bedtime, sleeping, and dreaming may be especially difficult. As we've seen, a child suffering from traumatic stress reactions may have trouble sleeping. When a child like A. M. shuts her eyes, images of past traumatic events may appear. Later, nightmares may awaken her. For this reason, a traumatized child may avoid bedtime.

Being in bed may also make children feel especially vulnerable or alone. They may have been sexually abused while in bed, or thrown into bed at the end of a parent's raging and physical abuse.

A child who's been traumatized may also find waking up in the morning difficult. Children who have grown up in unstable environments may feel that no sooner did they feel safe enough to go to sleep than they were being asked to wake up and face the day again.

Sleep and Bedtime (Continued)

- ·u)
- Help your child to "own" the bedroom.
 Respect and protect your child's privacy.
- Acknowledge and respect fears
- Set consistent sleep and wake times with predictable, calming routines.
- Seek help if needed.

NCTSN | | |

Sleep and Bedtime (Continued)

Some basic steps you can take to help a traumatized child feel safe when going to bed, sleeping, and waking up include:

- Encourage a sense of control and ownership by letting the child make choices about the look and feel of the bedroom space.
- Respect and protect your child's privacy, and make sure that other members of the family do the same. For example, always ask permission before sitting on the child's bed.
- Acknowledge and respect your child's fears—be willing to repeatedly check under the bed and in the closet, or show that the window is locked. Provide a nightlight, and reassure your child that you'll defend against any threat.
- Set consistent times for going to bed and getting up in the morning, and establish regular, calming bedtime and waking rituals. Let the child decide how to be awakened. An alarm clock might be too jarring for a child who is always on alert for danger. How about a clock radio tuned to a favorite station? A touch on the shoulder? Make sure children know exactly what to expect each night and morning. By creating dependable routines, you can help your child start and end the day feeling safe.
- Children who are having a great deal of trouble with bedtime and sleep may need help from a therapist specifically trained in trauma treatment.



Open the floor for five minutes of suggestions and discussion. One facilitator should lead the discussion while the other notes the participants' suggestions on the board or easel. Take care to keep the discussion trauma-focused.

I don't think there was a time when I wasn't abused as a child. In order to survive the abuse. I made believe that the real me was separate from my body. That way, the abuse was happening not really to me, but just this skin I'm in.

Still, my body sometimes betrayed me. Crying when I wanted to remain strong, becoming tired and refusing to obey my commands to stay awake, and, most horribly, physically responding to sexual advances. It seemed to me like my body had a mind of its own. I hated the thought of sexual contact, yet my body would respond to it, even when it was unwanted.

—C. M.

Read-Aloud Quote

Ask for a volunteer to read the quote aloud. If no one offers, one facilitator should read the slide.

"I don't think there was a time when I wasn't abused as a child. In order to survive the abuse, I made believe that the real me was separate from my body. That way, the abuse was happening not really to me, but just this skin I'm in. Still, my body sometimes betrayed me. Crying when I wanted to remain strong, becoming tired and refusing to obey my commands to stay awake, and, most horribly, physically responding to sexual advances. It seemed to me like my body had a mind of its own. I hated the thought of sexual contact, yet my body would respond to it, even when it was unwanted."

Children like C. M. have learned to see their bodies as the enemy, or as something that needs to be hidden and made as unattractive as possible. Seemingly positive things like a hug, brushing hair, or a hot shower may have very different meanings for a child whose body has been violated. We need to be very sensitive to our children's trauma history when it comes to situations that involve physical boundaries, including personal grooming, privacy, touch, and medical exams and procedures.

Physical Boundaries Children who have been neglected and abused may: Never have learned that their bodies should be cared for and protected Feel disconnected and at odds with their bodies See their bodies as "vessels of the negative memories and experiences they carry, a constant reminder not only of what has happened to them but of how little they

Physical Boundaries

NCTSN Employ

Do you remember when you learned to brush your teeth? To comb your own hair? To wash your face?

For many of us, learning those basic skills happened so early that it's hard to recall exactly who taught us, or when.

But have you ever noticed how often the children who come to our homes don't seem to have these skills? They may arrive with teeth that are desperately in need of cleaning, or hair so tangled it's hard to get a brush through it. And they may be resistant to grooming, to bathing, to anything that involves seeing or touching their bodies.

- ① Children who have been abused and neglected may never have learned that their bodies should be cared for and protected.
- Sexual and physical abuse can leave children like C. M. feeling disconnected from—or even at odds with—their physical selves, with no sense of ownership, comfort, or pride in their bodies.
- Instead, they may see their bodies as "vessels of the negative memories and experiences they carry, a constant reminder not only of what has happened to them but of how little they are worth."

Physical Boundaries (Continued) (Group Activity)

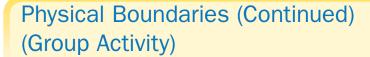
- Respect your child's physical boundaries
- Make the bathroom a safe zone
- When helping younger children bathe, ask permission before touching and be clear about what you are doing and why.

NCTSN ETTEL



For more information on safety issues,

refer participants to
"Managing Emotional
'Hot Spots': Tips for
Resource Parents" and
"The Importance of Touch:
Caring for Infants Who
Have Experienced Trauma"
beginning on page 4-29 of
the Participant Handbook.



Some of the steps you can take to help children feel more comfortable and safe within their bodies include:

- Respect the child's physical boundaries. Don't assume the child wants to be hugged; take cues from your child before initiating physical contact.
- Make the bathroom a safe zone: introduce older children to all the workings of the bathroom, and make it clear that their time in the bathroom is private, and that no one will be walking in on them during bath time.
- When helping to bathe younger children, be careful to ask permission before touching and to be clear about exactly why, how, and where you will be touching them.



Open the floor for five minutes of suggestions and discussion. One facilitator should lead the discussion while the other notes the participants' suggestions on the board or easel. Take care to keep the discussion trauma-focused.



Let's Take a Break!

Announce a 10-minute break.

Be sure to remind the group of the location of bathrooms, phones, etc.

Note the current time and the time when the workshop will resume.

People, situations, places, things, or feelings that remind children of traumatic events: May evoke intense and disturbing feelings tied to the original trauma Can lead to behaviors that seem out of place, but may have been appropriate at the time of the original traumatic event

Trauma Reminders

Psychological safety comes not only from having a sense of control over your outside world, but also from having a sense of control over what goes on inside yourself.

Trauma reminders can cause physical and emotional reactions that threaten a child's sense of safety.

As we discussed earlier in this training, during a traumatic event sights, smells, sounds, things, places, people, words, colors, even a child's own feelings—can become linked with the trauma.

- Afterward, exposure to any of the things that have become associated with the trauma in the child's mind can bring up intense and terrifying feelings, similar to those felt during the trauma itself. Sometimes the child may understand what's happening, but more often than not the reaction is completely unconscious—which can make it even more terrifying.
- Exposure to trauma reminders can prompt children to behave in ways that may seem out of place in the current situation, but that made sense—and may even have been helpful—at the time of the original traumatic event.

Trauma Reminders' Impact



Frequent reactions to trauma reminders can:

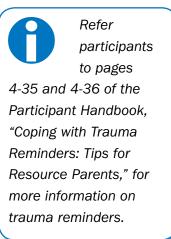
- Keep a child in a state of emotional upset
- Be seen by others as overreacting to ordinary events
- Result in avoidance behaviors
- Isolate the child from peers and family
- Make a child feel ashamed or afraid of going

NCTSN Translation

Trauma Reminders' Impact

Children who have been exposed to chronic trauma may face many trauma reminders in the course of a day. They may feel as if danger is everywhere and they can never be safe.

- Facing many trauma reminders can keep a child in a chronic state of emotional upset.
- Since other people may not recognize the child's trauma reminders, they might think that the child is overreacting or reacting strangely to ordinary events.
- In order to avoid trauma reminders, a child may become isolated.
- A child who is having frequent reactions may avoid other people or activities because that is the only way to feel safe.
- Children—particularly adolescents—can be embarrassed when others notice their reactions to trauma reminders. For example, a teenaged boy who jumps in class every time someone drops a book or slams a locker door may worry that his friends will make fun of him, or think he is going crazy.



When your child or adolescent has a reaction, make note of: When Where What When possible, reduce exposure. Share your observations with your child's caseworker and therapist.

Identifying Trauma Reminders

A child who is having frequent reactions to trauma reminders may need trauma-focused psychotherapy to help identify reminders and reduce the intensity of reactions. No one expects you to be your child's therapist. (We will be talking more about this in Module 7: Becoming an Advocate.) That said, there are things you can do:

- Be observant. Since your child may be unaware of what is causing the reactions, you may have to play detective to make the connection between a reminder and the trauma. When your child has a reaction, look for patterns and pay attention to:
 - When the reaction occurred. Has the child had similar reactions at the same time of day? What happened before the reaction?
 - Where the reaction occurred. School? Home? A particular room? A particular place in the room?
 - What was around at the time? Try to identify the people, sights, sounds, and other cues that might have been trauma reminders for your child. Remember that the reminder may be something obviously related—such as loud noises for a child who was witness to a shooting, or something that just happened to be present when a traumatic event occurred—such as the song that was playing on the radio.
- Once you've identified potential trauma reminders, it may be possible to reduce your child's exposure. In the long run, we want to help our children to manage their reactions to trauma reminders. But in the beginning—especially with children too young to comprehend the relationship—the best way to help may be to manage the environment to reduce exposure.
- Let the caseworker (and therapist if there is one) know what you've observed.

What's the Reminder? (Group Activity) • What situation or event did the child react to? • Based on the child's trauma history, what was it a reminder of? • What else could serve as trauma reminders? (Try to think of at least three for each child.)

NCTSN Transfer

What's the Reminder? (Group Activity)

Let's try identifying trauma reminders in some of the children we met in Module 1.



Ask the participants to break out into three groups. Assign one child to each group: Tommy, James, and Javier. Ask the groups to turn to relevant pages in the Participant Handbook (for Tommy, pages CS-9 and CS-10, for James, pages CS-13 to CS-16, and for Javier, pages CS-17 and CS-18) to review each child's background and to answer the questions on the slide.

- For Tommy, ask the group to focus on "Tommy hears an argument."
- For James, ask the group to focus on "James won't come to dinner."
- For Javier, ask the group to focus on "Javier and the iPod®."

Allow five minutes for the group to review and discuss, and then ask each group to report their thoughts. Allow 10 minutes for discussion. One facilitator should lead the discussion while the other makes notes on the board or easel and helps to monitor the room. Make sure the following points are made:

Tommy

- His foster parents' argument (the sound of a man and woman screaming, disagreeing) was a reminder of his parents' arguments, and he reacted as he had to their arguments.
- Other potential reminders: screaming, physical violence in real life or on the TV or in a movie; seeing someone get hurt or getting hurt himself; a woman crying; an ambulance or police siren

James

- Since James' grandfather died while at the dinner table, something about this dinner must have been a trauma reminder. In this case it's the leg of lamb that his grandmother prepared the night his grandfather died.
- Other potential reminders: seeing someone collapse; seeing a heart attack depicted in a book, on TV, or in the movies; paramedics or ambulances; seeing a man on the street who looks like his grandfather; the anniversary of his grandfather's death, etc.

Javier

- When the boy reached inside his jacket, it reminded Javier of the boy who reached for a gun the night his friend was shot. His feelings when his schoolmates laughed may also have been a reminder of his feelings of powerlessness and humiliation when he could not stop his father from abusing his mother.
- Other potential reminders: blood; the sight of guns or sound of gunfire on TV or in a movie; a group of boys congregating on a street corner; anyone shouting or fighting; his own feelings of powerlessness or humiliation, etc.



Think about the child in your "My Child" Worksheet. Based on what you know about his or her trauma history, has he or she exhibited any behaviors or reactions that may have been due to trauma reminders?

Allow five minutes for discussion.



Coping with Trauma Reminders: What Parents Can Do

Now let's talk a little bit about what you can do to help when your child experiences a reaction to a trauma reminder.

- Your first and foremost goal is to ensure the child's physical safety. Make sure your child won't get hurt because of panic, distress, or dissociation.
- Reorient your child to the here and now. You can do this by focusing the child's attention on something in the present. Some children like being touched at this time, others don't. You can give the child something to do to ground him or her in the present. For example, one trauma expert suggests having an upset child drink a glass of cold water.
- As the child begins to calm down, provide firm and specific reassurances of safety. Give the child a chance to tell you what happened. Encourage the child to describe physical sensations as well as emotions.
- Help your child define what happened. It can be helpful to repeat or rephrase the child's words to affirm that you understand.
- Respect and normalize the child's experience by acknowledging how real and overwhelming it felt. Remind your child that reactions to trauma reminders are normal. It's the way our brains protect us from danger—they just sometimes keep reacting even when the danger is past. Reassure your child that the intensity of reactions to reminders usually lessens over time, especially as your child becomes aware of what's causing these reactions.
- Help your child understand that the present situation is different from past experiences. Even though the trauma reminder may make the child feel as if bad things are still happening, those events are over, and now you are there to protect and help.



Coping with Trauma Reminders: What NOT to Do

Children's reactions to trauma reminders can be unexpected, confusing, and frustrating, which makes it all the more important to view their behavior through the trauma lens and remember your role as emotional container.

Above all, try not to:

- Assume that the child is just being rebellious. Remember, children who are reacting to a trauma reminder rarely understand why the reaction is happening and are not fully in control of the reaction.
- Tell the child that he or she is being dramatic or overreacting.

 This will only reinforce the child's sense of being misunderstood and out of control.
- Torce the child to face the reminder. Understanding and overcoming trauma reminders takes time.
- Express anger or impatience. Responding with anger or impatience will only reinforce the negative beliefs in the child's Invisible Suitcase.



Coping with Trauma Reminders: What Children Can Do—SOS

We can empower our children by helping them develop their own strategy for coping with trauma reminders or other stressful situations.

SOS is one technique that can be helpful. You can coach your child in this technique and help walk him or her through it the first few times.

- **Stop,** take a deep breath, and try to put the brakes on the reaction before it gets out of control.
- **Orient** yourself to the place you are right now, not just externally, but internally. How is your body feeling? How are you breathing? Breathing too fast? Holding your breath? Is your heart pounding?
- Seek help, in the form of a stress buster—something that makes you feel better and more relaxed—or by talking to a friend or adult you trust.

SOS: Identifying Stress Busters



- Activities (running, playing a particular song)
- Things (a toy, a stuffed animal, a picture, a favorite blanket, a particular food)
- Places (a spot in the yard or a park, a room)
- People
- A specific thought, phrase, or prayer

NCTSN ETTEL

SOS: Identifying Stress Busters

To use SOS effectively, children will need to have some idea of what helps them to calm down when they are feeling upset or stressed. Your child's stress busters might include:

- Activities (running, playing a particular song)
- Things (a toy, a stuffed animal, a picture, a favorite blanket, a particular food, a special book)
- 1 Places (a spot in the yard or a park, a room)
- People
- Specific thoughts, phrases, or prayers

You can help your child to figure out which stress busters work best in which situations by filling out the "Stress Busters for Kids Worksheet" on page 4-37 of the *Participant Handbook*.

Coping with Trauma Reminders (Group Activity) How did the resource parents . . . Reorient the child and ensure safety? Help the child understand what happened? Differentiate past from present? Give the child new options for coping with a reminder? Would you have done anything differently?

NCTSN ETTEL

Coping with Trauma Reminders (Group Activity)

Okay, let's go back to your smaller groups and review what the resource parents actually did and said to help each of the children: Tommy, James, and Javier. Review the case study and discuss the following questions about the resource parents' actions:

- 1 How did they reorient the child and reassure him of his safety?
- How did they help the child understand what was going on in understandable terms, given the child's age?
- 1 How did they help the child differentiate past from present?
- ① Did they provide the child with new options for coping with trauma reminders?
- Would you have done anything differently?



Allow five minutes for the group to review and discuss, and then ask each group to report their thoughts. Allow 10 minutes for discussion. Make sure all of the points on the slide are covered.



Read-Aloud Quote

Ask for a volunteer to read the quote. If no one volunteers, one facilitator should read it aloud.

"I woke up in a panic. I couldn't stay asleep. [My foster mother] came into my room. 'Honey, what's wrong?'

I couldn't even tell her how I felt. I couldn't get the words out to say what was the matter.

'You're safe here, OK? If anyone tries to get through the door to hurt you I will get them.'

I was glad that she was so aggressive—it made me feel like I could loosen up and let someone else protect me. I didn't have to worry anymore."

When it comes to building a safe place, this should be our goal—not just at bedtime, but in every aspect of our children's lives. When traumatized children feel safe in our homes and believe that they can trust us to protect them, they can at last "loosen up" and the healing process can begin.



Module 4: Wrap Up

Ask each table to choose two Big Ideas that they consider to be the most useful or important things that they learned during the session, and to write each idea on an index card.



Give the groups three minutes to discuss and decide on their ideas. One facilitator should serve as timekeeper and give the groups a one-minute warning before calling "time" and collecting the cards.

One facilitator should read from the index cards, while the other notes the ideas on the board or easel. Allow another five to 10 minutes to review, discuss, and condense (if appropriate) the ideas presented into three or four Big Ideas for the day. Ask the participants to keep these ideas in mind as they deal with their children in the days before the next module.

Finally, revisit the Feelings Thermometer and go around the room checking in. If desired, do a relaxation or stress buster exercise with the group before breaking for the day.

End of Module 4