

Full Circle

Therapeutic Services



A guide to understanding and caring for a child with development trauma and attachment difficulties



Children who have experienced trauma and loss are often misunderstood by those who don't know about the impact of early trauma.

When this happens, adult responses can impact on the child's development and healing. This helpful guide will support you to understand the impact of developmental trauma, attachment difficulties and how to help support healing and development for a child. It will also help to de-personalise some of the challenges you may be experiencing.



Developmental trauma and attachment difficulties

Developmental trauma is what children experience when they have been subject to neglect and abuse within the context of their key relationships.

It is important to remember, that even when a child is removed at birth, they can still be impacted by their separation from a primary caregiver, trauma they experienced pre-birth and by their parents' trauma in their genetic makeup. Many children don't explicitly remember their early trauma, however their body can, even when their mind does not, and this can impact upon a child's development, health, and emotional well-being.

Because such trauma and loss impact on early relationships, many children do not experience a secure attachment and this can impact upon the way they see themselves, others and the world around them.

However, the quality of their safe relationships now can support healing and challenge their negative internal model and there is hope for the future!

This leaflet aims to cover some of the key areas associated with developmental trauma and attachment difficulties and how to help a child to heal.

Invisible elastic

It can be helpful to think of attachment as the 'invisible elastic' that connects two people together.

For children who have had poor early experiences, their elastic may be very thin, fragile or short.

Some children find it really hard to go to sleep (the ultimate in letting go of control and having to trust) or even to let you go to the toilet alone! The 'elastic' might not be long enough to stretch all the way upstairs if their parent or carer is downstairs.



For these children, bedtimes can't be rewarded or sanctioned in the way that most parenting manuals would advise. It is okay to help your child feel safe enough to fall asleep. This may mean you have a long bath-time, read stories, talk, lie beside them, hold their hand or stroke their hair until they fall asleep. Enjoy the closeness rather than doing battle and becoming stressed!

Don't think of this as over-indulging them or 'making a rod for your own back'! You must meet the need, and eventually the child's elastic will get strong enough to allow them to go to sleep and trust you to keep them safe.

Invisible elastic can have difficulty stretching to nursery or school or lasting long enough for a parent to return from work. Don't be too surprised if you feel you are being 'punished' for your absence.

Attend to the elastic in the early days, weeks and months of your child coming to live with you, to get the foundations in place. One or two primary relationships need to be firmly established before anything else happens to begin to embed these relationships. This provides the child with a safe base from which to go and explore the world.



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Take time to tune in and get to know them without distractions from extended family or friends, and the automatic expectation they should go straight to school or nursery, whatever their chronological age. Get the

foundations right and the child will be much better able and available to learn and socialise when they do go to school.

Attachment-seeking behaviours

Children automatically engage in attachment-seeking behaviours. You will often see games such as hiding or hide and seek.

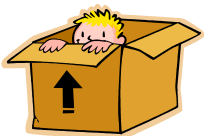


This can be linked with self-worth. The child wonders if they are worthy of your time and attention, and questions if you will bother to come and look for them (so you must go and look!)

This can be an echo of early games like peek-a-boo, when the child gets excited by 'losing' and then 'finding' an important person.

In this case the child may benefit from you making a fun game of searching all the other places around them and wondering where on earth they are, building the tension before you find them and having a good giggle to reduce the tension again.

Alternatively the child may benefit from you 'knowing' where they are when they are hiding, and you can tell them this is because you are the adult and you always know where they are because it is your job to keep them safe.



Playfully hiding and jumping out can strengthen the invisible elastic between you because you will need to be constantly aware of each other.

Other attachment-seeking behaviours include feigned helplessness which can be an invitation to take special care of them and respond to the much younger child within them, rather than the older child on the outside.

Children can, if given the right circumstances, re-visit very early stages of development like mimicking facial gestures, gripping on to a finger before sleep, or repeatedly throwing objects for a parent to pick up (like from a highchair).

Some children drink excessively. Even if they don't, they may welcome a baby bottle/sports bottle to drink from or being fed and held closely while they do this. This can be part of a game for an older child. Have baby equipment and first toys freely available and make sure your reactions give permission to re-do this stage at their pace.



Healing



Caring for a child who has had negative and traumatic childhood often experiences problems with attachments, feelings of safety and their views of themselves and the world around them. This can be an exhausting experience for all, but it can also be full of surprises, and each little breakthrough in a child's healing is a chance to celebrate.

The process of 'healing' can be painful for everyone concerned. It can be a slow and sometimes frustrating business as you take two steps forward and then think you've gone three steps back!

However, there are things that can be done to help the healing process, and the earlier and more wholehearted you can be, will make a big difference.

Caring for a child who has experienced trauma and subsequent attachment difficulties turns all the normal parenting rules on their head, and requires a creative, thoughtful and deliberate approach to everything.

Keeping life low-key, calm, simple and structured can really help. You will also need to keep TV, computer games and other such stimulation to a minimum, and adapted for a much younger age.



Sometimes you will need to advocate for your child, who will be working extremely hard on an emotional and physical level and may have few resources left to learn or conform in school, or works so hard conforming in school all day that this effort 'spills out' at home. It can be confusing when at times they manage well and other times they wobble and can really struggle. At these times, it can be hard to see or help others to see that that they 'can't do' rather than 'won't do'.

The good news is that if they are given time and pressure and demands are reduced for them, they will eventually be in a much better place to absorb information and their education will catch up.

When a child has been neglected or abused or suffered changes in a primary carer, it can be helpful to liken what they are going through to a

sudden and catastrophic bereavement.

The process can be very similar, as they go through shock, numbness, denial, anger, bargaining and some resolution. Sometimes they go through this several times in varying order, as gradually they come to terms with the losses and realities of their past.

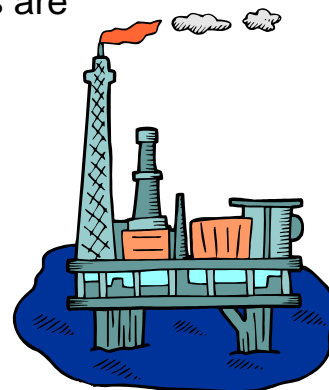
Where a child is still with a birth family, it can feel much harder to work towards recovery. If the family struggled to meet the child's normal developmental needs in the past, they will have to work very hard to provide the more advanced therapeutic parenting level of care required for a child. It is also important to recognise there may be triggers as a result of their past experiences, even if the child is safe now.

The 'oil rig' metaphor

Children and young people with attachment difficulties are like oil rigs with fragile and at times, ineffective foundations.

All the gaps from their early years mean that the platform of their life now feels really unstable.

That means that every storm or knock that comes their way makes them wobble much further and for much longer than other children.



They swing back and forth with the impact of life events like bereavement, changes, worry, illness and hundreds of other smaller things that we might not even notice.

Sometimes these wobbles may not be noticeable for a child who is more avoidant or internalises everything – but deep inside, their bodies experience the same challenges as those that show their worries outwardly.



Children can be helped to strengthen their foundations and reduce the impact of life's wobbles, but they need someone safe and strong to do that work with them much of the time.

Some of that work will be about letting them go over again the things they missed out on when they were younger and helping them

to rebuild or fill in their foundations.

They will need to be reassured over and over again that they are safe now, and that you are going to take good care of them.

Often, they need to be dressed, fed, bathed, played with, encouraged and supported with even the simplest tasks.



They might need to be rocked, snuggled into a blanket, read stories, play at a younger age than expected, given bottles to drink from and dummies to suck.



They might also need to do 'sensory play' like crayoning, playdough, finger painting, sand and water play. Hand massages and 'pamper' sessions can be useful for older children. You can be as creative as you like in allowing them opportunities for re-parenting, nurture and safe touch.

In no way are these children 'big' or 'grown-up', and our expectations of them should be the same as much younger children – think stage not age!

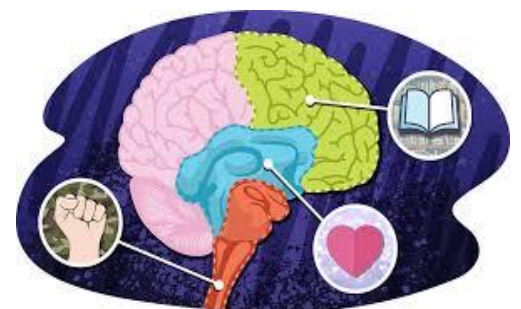
We can't rush this stage of healing and have to keep on meeting those early needs until the child indicates they have moved on to another developmental stage by changes in their behaviour.

The limbic system doesn't learn

Some things are controlled by our rational brain, and others are controlled by the 'limbic system' or the 'amygdala'. Both are a deeper and more primitive part of us.

The limbic system is the part of our brain involved in our emotional and related behavioural responses. Attachment is part of the limbic system.

The 'amygdala' is like the brain's guard dog and responsible for fight, flight, freeze, flop responses.



In children who have experienced trauma from pre- and post-birth experiences, or interrupted attachments, the limbic system and the amygdala can become more sensitive and be triggered even when the situation appears safe, or when it feels there is a threat to attachment and emotional needs being met.

For older children, they have often developed really clever strategies to have these needs met and keep themselves safe. We need to respect the reason for these strategies and why it may be hard for them to let them go.

Rational thoughts and actions respond very well to being taught, rewarded or punished. They love star charts and report cards. However, attachment behaviours do not – these are designed to meet the need therefore we need to think about the hidden need and connect with this.

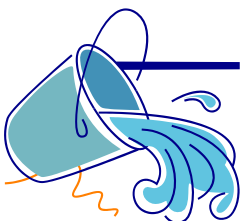
You cannot make much difference to a person's 'primitive' reactions by trying to teach, punish or reward them.

Needs-----Behaviour-----Outcomes

When a child's behaviour is troublesome and troubling, most people focus their energy into the end of the line, where the outcomes are, in an attempt to use things like control, bribery or shame to eliminate the behaviour – here the focus is the 'correction'.

However, where children have experienced trauma and have attachment difficulties, the most helpful place to focus our energy is at the beginning of the line, with the **need** – the focus should be the 'connection' with the child's need and your inner world.

Troubling behaviour is a clever way of telling us that something feels very wrong, and we need to treat the cause, not just the symptoms if we are to have any hope of success.



We call this approach 'flooding the need'. It is time to play detective, look closely at the behaviour, wonder what early developmental need might be behind it. Then you must do *everything* you can to meet the need.

If what you do helps to reduce the behaviour, then do more of it. If it doesn't work, have another look at the behaviour and try again.

Usually, the clue is in the child's behaviour, and a creative, playful response

is the most effective.

For example, if a seven year old is having difficulty getting ready for school, try helping them to get washed and dressed, tickle their toes before you put their socks on and make it fun. Appeal to the toddler inside and use the opportunity to get close.

PACE Communication (Dan Hughes)

PACE communication is an excellent way promote connection. PACE is a way of thinking, feeling, communicating and behaving that aims to make a child feel safe, build trust and enhance connection – with their hidden need and your relationship.

PACE means being

Playful

in your interactions and communication

Accepting

of the child and their whole world without judgement

Curious

about the child's feeling, experiences, and their world

Empathy

how the child you care, understand and recognise them



Dismantling the hard-drive

In their early months and years, children's brains develop connections and patterns that become 'hard-wired'.

Often, they are taught the wrong things over and over again, for example if a parent usually gives in to 'temper tantrums' when a child is dysregulated, then a child can feel very unsafe, and learns that they have to take control since no one else will.



This does not mean the child is 'naughty'; it is simply that they have had to do this often in the past because their parents have not been safely in charge or have been neglectful or abusive.

They will keep on doing this even in new situations where tantrums don't work, because that is the only strategy that they know, and they continue to do it on 'auto-pilot'.

Temper tantrums are the most obvious behaviour, but there will be lots of other things the child has learned to do to ensure some of their needs are met or to keep themselves safe, even when they make very little sense!

When their known strategies don't work in a new place, this can cause a lot of distress and anxiety, because they don't know what to do instead.



When a child moves from an unsafe home to an alternative place, it is like a British person arriving accidentally in Japan. Everything looks, smells and feels different!

The map doesn't fit, the language is difficult to understand and all the old strategies for keeping safe are of little use!

Letting go of and dismantling all their old ways of coping can be a very painful, terrifying process, full of uncertainty and fear.

Children need very sensitive, nurturing, tuned-in support in order to embark on this long and difficult journey.

They need to be applauded for the strategies they developed in the past to keep safe in an unpredictable situation but told that it is time to let go of

things that are no longer helpful or useful.

Categories of behaviour

Children are very complicated creatures! Some behaviour will belong in different categories and need a specialised response.

The first trick is to recognise them and sort them into boxes! Sometimes you will see normal testing of boundaries that will respond to rewards or brief, relevant and natural consequences.

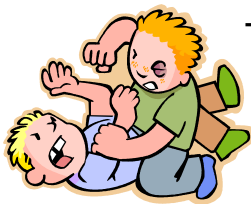


Other times you will see risk-taking behaviour that looks like a child is crying out 'stop me'!

Anything where a child is climbing up a height, running near traffic, wielding a sharp or heavy implement etc needs an intervention where the grown up takes control quickly and firmly.

By doing this you are showing them that you are in charge, and that you care enough to keep them safe. While you take hold of them, tell them this repeatedly.

The third type of behaviour looks like a total meltdown and is when something has wounded them deeply (emotionally). This may be triggered by something we haven't even noticed or what their brain sees as a demand that we don't, but the child thinks and feels it is a real threat to their safety and security.



The child may be aggressive and agitated in the middle of their hurt and despair, and they may lash out and hurt people close to them perhaps by accident or maybe to let them know how much they are hurting inside.

This kind of behaviour needs a response that is strong, loving, accepting and reassuring. Children need to be kept close at this time, *never* sent to their room or isolated in any other way as this can evoke significant feelings of shame.

They will need your help to calm down, and once they are a bit calmer and in the right brain space to hear things, use the chance to let them know you can see that they are hurting, and how sad and sorry you are that they hurt so much and that you want to help.

Children who melt down in this way cannot help it, and this behaviour does not respond to threats, sanctions or rewards because it is outside of their conscious control.

Limbic insults

Meltdowns are often triggered by what we call 'limbic insults'. These are things that cause deep emotional wounds to a troubled child and can continue to do so into adulthood.

The triggers and strength of the reaction are different for each person because they depend on early experiences, and on what happens later on in life too.



Limbic insults throw people back to feeling the same as an unsafe and abandoned infant or child – a really wobbly state of mind!

These can sometimes result in going back to earlier coping strategies, so it can feel like the child is 'back to square one' maybe after a time of progress.

You will often see problems returning in sleeping, eating, hoarding, lying, hygiene and the regulation of emotions as a result.

Triggers are not always obvious – these children can be hypersensitive to anything that feels like abandonment, even if we haven't noticed it!

Sometimes children can encounter 'time-holes', where an image, smell, time of year or other reminder pulls them back to earlier traumatic times.

Children with these difficulties need vast amounts of reassurance, predictability, and stability. You must turn up on time, be where you say you will be, be consistent and keep to your routines.

Children with attachment difficulties and developmental trauma can find excitement and change very stressful and distressing, so while they are being helped to heal, they may need to avoid things like holidays abroad, big parties or celebrations, house moves, major re-decoration or re-structuring.



If some of these things are unavoidable, think about how they will impact and what you can do to provide support, preparation (to minimise disruption) and connection – be patient and try and work through any challenges the change may bring.

Often it is a sign of progress when the recovery time from an 'insult' goes down in duration, frequency and severity.

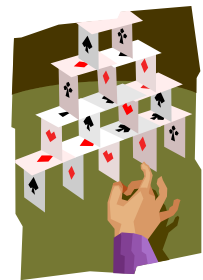
Shame and the 'house of cards'

Children who have experienced trauma and not had a secure attachment, have trouble with their sense of themselves as people. They feel worthless, unlovable, disgusting, ugly, lonely and many other negative and unhappy feelings.

These children may have been neglected, injured and insulted repeatedly by those very people who should have been building them up. They will have internalised those insults and they will be a part of who they believe they are.

You may see them act out towards other children, their siblings, carers or parents. The names and tone of voice they use to call other people often mirrors their own experiences.

They can often try and build their self-esteem on superficial or unattainable things like trying to be 'good', getting their sums right or winning their computer game. It is important to build a child's self-esteem on genuine and small things. Praise them for specifics, rather than saying 'good girl' or 'clever boy'. Make them feel worthwhile by spending time with them and getting close whenever they will let you.



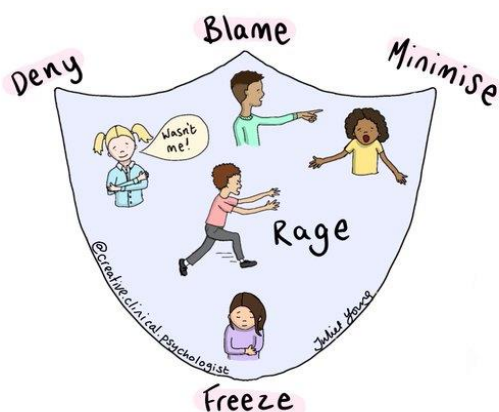
When self-esteem is so fragile it is just like a house of cards - one little flick is all it takes to come crumbling down around them.

For these children, the shame they can feel is intolerable because when they were younger and made mistakes, no one reassured them that they were still worthwhile people, no matter what they did.

The Shield of Shame

(adapted from Golding and Hughes, 2012)

Shame can be such a painful emotion to feel that we often respond in ways that end pushing people away (at a time when connection is really needed)



Reduce any disabling feelings of shame for poor behaviour. It is okay to say what they did was wrong, but what is key is reminding them that you love them and value them as a person. Feelings of shame can be tackled by using PACE communication and connection.

Whatever they do or say to you, don't take it personally; it is sometimes the only way to let people know the damage they have experienced and how much they need your help.

Re-enactment

Familiarity is comfortable while new strange situations are not. So, when children have an unpredictable, high-stress or frightening early start in life, then oddly that is what is comfortable for them.

Calm, loving environments feels very alien and unreal, and sometimes too much to handle.

Children with attachment difficulties sometimes provoke arguments or seem like they are 'spoiling' a nice time deliberately.



Some of what they are doing is trying to make their new parents or carers behave like their old ones, so then it will feel familiar, and they'll know where they stand.

These children expect to be rejected and mistreated because that is what happened to them before, and it fits with the image that they have of themselves as a result.

Sometimes they will refuse to acknowledge enjoyment or will damage their things, break toys or special presents they don't really feel they deserve.

Nice things and positive experiences do not fit with their map of the world, and so cause a deep discomfort and mistrust.

If you find yourself with feelings that you know don't really belong to you or start reacting in a way you didn't expect, this can be a reaction to the child pushing you to be someone else from their past. Sometimes they will struggle to see you for who you really are and will see the 'old' person instead.



This has been described as 'toxic waste'. The 'poison' from their past comes with them into each new relationship and contaminates the process and the people involved which can be really challenging.

Usually if their main carer in their birth family caused them the most harm, it is their current carer in that position that they will target with most negative

energy e.g. if the harm was from their mother, they may now 'target' their female carer. They try to sabotage the relationship when the new person is starting to become important, as it feels unsafe.



The child will need constant repetition that you are their new, safe mum, dad or carer to help them with this. It is also really important to look after yourself and use your networks for support so that the toxins don't overwhelm you.

The Lie 'by-pass'



Most children tell lies, it is part of normal development, and it can take time for them to learn to differentiate between fact and fiction, and to find out about the value that we place on truth.

However, children who have had traumatic early histories may have learned to tell lies to avoid severe punishments or extreme parental reactions.

Conjure up a picture in your mind of someone much more powerful than you are shouting, insulting, and hurting you, or locking you in your room for days because you've done something wrong. It is worth learning to lie to avoid getting hurt and lying becomes an instant response to any kind of accusation or threat.

In a new family, lies can confuse parents who get caught up trying to squash this unwanted symptom, and the situation can become unnecessarily punitive.

It doesn't work to impose a more severe sanction if a lie is told on top of a misdemeanour, because the lie is an essential and automatic part of their survival strategy.

Instead, expect the lie and build a by-pass around it!

If you know for a fact they are lying, tell them clearly that you know exactly what happened, and carry on with your version of events as if they haven't spoken.



It is more complicated if you don't know what actually happened, but you can say what you strongly suspect to be the truth and tell them that you are going to choose that version of events to follow.

Sometimes you might be able to applaud their creativity and be playful with this!

They will need constant reminding that everyone makes mistakes at times; it is not the end of the world, and they won't get hurt.

Your child needs to know that their rational actions and choices have consequences, but these are reasonable and safe, and they don't involve the withdrawal of love and affection or your emotional or physical presence.

Avoidance

Avoidance is a useful strategy for keeping safe from risky closeness.

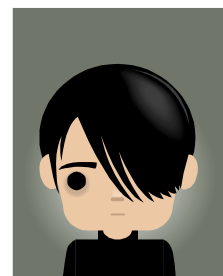
Some children can try to live on the periphery of their new family, and this is usually more obvious with slightly older children. They may use absorption in TV or computers, going out with peers or other strategies more than the average teenager, in order to help avoid intimacy.

These children seem to find it very difficult to get close and be fully involved in family life, but they may not see it like this at all, if they are happy and relatively comfortable where they are.

Some children may find it very hard to show enthusiasm, excitement or anticipation for planned family events or holidays. They may find it difficult to participate in team sports or events.

They may feel disconnected to their feelings or bodily sensations like heat, cold, hunger or thirst. They probably can't say how they feel, and will rarely share inner feelings, thoughts or hopes.

Usually, they are uncomfortable expressing needs, relying on others for help or asking for help.



These children need a high level of praise and reassurance, though they can't ask for it. They will often say they are 'not bothered' but really, they are very, very bothered indeed.

You may find you have to change your expectations, and don't take their

distance personally; it doesn't mean that they don't care or feel like they belong with you.

If you learn to use a different interpretation of their behaviour, sometimes it can feel a little easier to deal with avoidance. If they say something is okay, it is the same as someone else giving a big compliment! A cup of tea made for you might be their way of showing real affection and warmth.

Family boundaries may need to stretch to accommodate this more distant member, rather than pushing them to come closer.

Developmental trauma & attachment difficulties in school

Children with attachment difficulties often exhibit the kinds of behaviours already described here within school and particularly towards the teacher they feel closest to. They need to be supervised closely and may struggle to work independently.



Because their first, crucial relationships didn't meet their needs, children with attachment difficulties have problems in every relationship in their lives.

Think about all the different relationships a child has to make and maintain in school. These include many other children, teachers, teaching assistants, lunchtime supervisors, caretakers, parent helpers etc. Having a key attachment figure in school can be really helpful. For children who struggle and constantly seek out the teacher, sitting the child close can help.



These children have to work much harder than others just to survive in a school setting, and relationship minefields are around every corner waiting to mess up their day and their education.

Often they are working flat-out to process their traumas and build new attachments, so they have little energy left for school work or their challenge spills out once they arrive home.

When the limbic system is in overdrive, the systems for acquiring knowledge go into 'idle', so academic tasks can feel overwhelming. The best approach is to allow the child to undertake simpler tasks to build confidence, and when very distressed or agitated, they may need to do

repetitive soothing actions like sharpening pencils, colouring in or cleaning chalk or whiteboards. Sensory resources or movement breaks may also help.

Children with attachment difficulties seem to have challenges with transitions; from one lesson to another, from lessons to break or vice versa, and of course from home to school and back again. The unstructured times at break and lunch are a real problem. Speak with the school and see what adaptations can be made to support the child in school.

Often many triggers and limbic insults can occur at school, and the child may seem to kick off for no reason to the 'untrained' eye!



With knowledge and a bit of detective work, it usually becomes apparent why they reacted that way, and steps can be taken to reduce the number of incidents and change how they are handled.

Helpful resources

If you would like to learn more, there is also a whole world of websites, books, support groups, podcasts and therapeutic children's books out there to help parents and carers of children that have experienced trauma. Here are some things parents/carers have told us they wish they knew about earlier!

- The Therapeutic Parenting Podcast (Centre of Excellence in Child Trauma) – a podcast covering several relevant topics to both you and your child.
- The National Association of Therapeutic Parents (NATP) membership is only £4 a month and they offer support groups, training, the COECT podcast (<https://www.coect.co.uk/podcasts/>) and lots more.
- There are local parenting support groups like Rollercoaster. Ask your workers for other recommendations.
- Books! We recommend Sarah Naish, including her 'A to Z of Therapeutic Parenting' or anything by Dan Hughes or Kim Golding.
- Beacon House for lots more resources, including good things to share with schools - <https://beaconhouse.org.uk/resources/>
- You Tube is a great resource! Search for anything to do with trauma, attachment and therapeutic parenting.
- Therapeutic children's books by authors like Margot Sunderland, Sarah Naish, Rosie Jefferies and Karen Treisman.

