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Focused on providing technical assistance to rural stakeholders to disseminate research findings, policy updates, best-practices and other rural health issues to statewide rural partners and stakeholders throughout the state.



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Today's presenter



Alejandro Palacios
Trainer, Arizona Coalition to
End Sexual Assault and
Domestic Violence

16 Trauma-Informed, Evidence-Based Recommendations for Healthcare Providers and Advocates Working with Children Exposed to Intimate Partner Violence

Alejandro Palacios



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16 Trauma-Informed, Evidence-Based Recommendations for Advocates Working with Children Exposed to Intimate Partner Violence

November 24th, 2015



Renee DeBoard-Lucas, Kate Wasserman,
Betsy McAlister Groves, Megan Bair-Merritt



www.PromisingFuturesWithoutViolence.org

Promising Futures

Best Practices for Serving Children,
Youth, and Parents Experiencing
Domestic Violence

FUTURES
WITHOUT VIOLENCE

What do kids need?

Program Readiness

Interventions for Children & Youth

Advancing the Field

Tools

Advancing the Field

▶ Research-Informed Strategies

- Trauma Informed Care
- National Center on
DV, Trauma, & Mental
Health

▶ Communities in Action

▶ Documenting Our Success

RESEARCH-INFORMED STRATEGIES

What is research-informed practice? Simply put, it's being informed about current research on what helps children (and their mothers), what doesn't help, and using this knowledge in your practice and in your organizational decision-making. That's it. Whether you have a big program, a small program or no program, research-informed practice can help you get started or enhance what you are already doing. Research can help you be informed about your decisions about practice with children and also support the ordinary magic that can happen when you spend time with a child or teen in your program.



Every day, there are multiple situations that advocates have to respond to when it comes to children and youth. Sometimes you provide planned and structured activities but often your everyday interventions and decisions seem to just happen. Particularly, if your program is a residential program,

Share Your Work

Please tell us about all of the innovative work you are doing in your community.

Background



- Exposure to IPV is a potent traumatic stressor for children, which may adversely affect their physical and emotional health.
- Caring adults can help children heal and thrive.

Origin of these Recommendations

- Ann Brickson, Coordinator for the Children and Youth Program for the Wisconsin Coalition Against Domestic Violence, requested help from Futures to:

“Break down what we know

[from the evidence-base]

about resiliency into actions that your average DV advocate (working in an underfunded, overworked crisis program) can use to build healing interventions for battered mothers, children and families.”

Origin of these Recommendations

- Recommendations were created recognizing that:
 1. Many programs are already employing some evidence-based strategies
 2. Few programs across the country have the financial and personnel capabilities to implement a fullfledged evidence-based children's therapy program like CPP
 3. Evidence-based strategies have common core themes
 4. If these core themes can be extracted, DV programs across the country can use them to help make their day to day therapeutic interactions with children and families more evidence-based.

Origin of these Recommendations

- The recommendations come from a review of traumatic stress literature and from core components of evidence-based therapeutic intervention models for children exposed to IPV.

- Child Parent Psychotherapy
- Trauma-Focused
Cognitive Behavioral Therapy
- Kid's Club



For additional information about these
and other program models, visit:

<http://promising.futureswithoutviolence.org/interventions-for-children/>

Presentation & Recommendation Goals

- To provide trauma-informed, evidence-based tools for advocates to help:
 - Strengthen resilience and competence in children and parents
 - Children make positive contributions to their family or community
 - Identify and nurture areas of competence, skill or talent
 - Connect children with supportive adults/mentors.

Presentation & Recommendation Goals

- Advocates can use the recommendations to assess areas in which they already excel, and determine areas in which they would like to further develop skills.
- Recommendations focus on interventions with a single child or family (as opposed to larger systems change).
 - Each recommendation can be adapted to apply to other types of work with children.

A Note -

These recommendations can be used in any setting –

- In Home
- Community Health Providers
- Shelters
- Daycare
- Head Start
- In Office
- In School

Recommendation #1



Understand that children of all ages, from infancy through adolescence, are vulnerable to the adverse impact of IPV exposure.

IPV is a potent toxic stressor

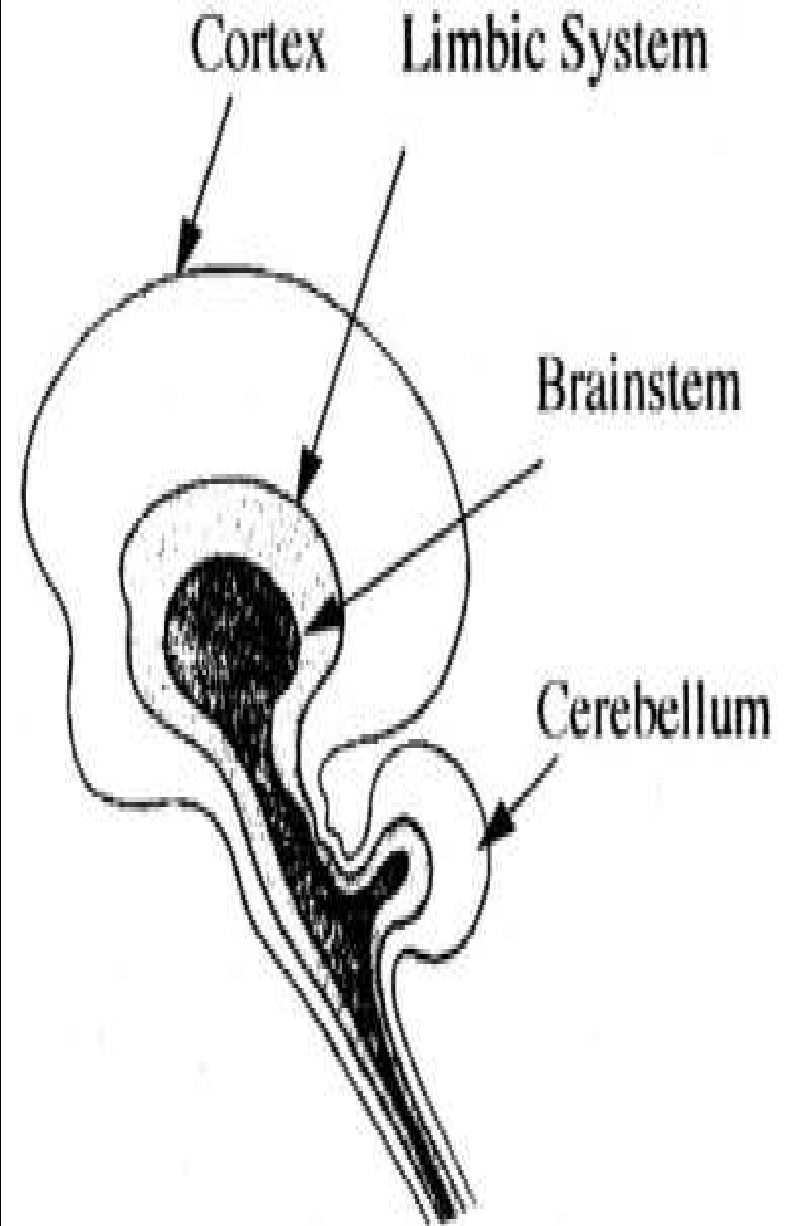
“Toxic stress refers to strong, frequent or prolonged activation of the body’s stress management system.

Stressful events that are chronic, uncontrollable, and/or experienced without the child having access to support from a caring adult provoke...toxic stress responses.”

- When children are exposed to IPV, they mount a fight-or-flight response. Doing this chronically over time leads to adverse changes in anatomy and physiology.
- Most people intuitively understand the stress of witnessing IPV for school-age children and Adolescents.

Key Resource for Parents: The Amazing Brain: Trauma and the Potential for Healing

http://www.instituteofsafefamilies.org/sites/default/files/isfFiles/The_Amazing_Brain-2.pdf



- Infancy is a time of tremendous brain growth
(think about what a child learns to do in the first 3 years).
- This period of growth puts children at risk for the impact of trauma.
- Child's environment and experiences shape early brain development.
- The brain prioritizes survival first.
- Exposure to violence can cause changes in brain development and function.

Recommendation #2

**Establish a
respectful and
trusting
relationship
with
the child's
mother.**



- IPV impacts a caregiver's parenting self-efficacy.
 - Guilt over children's exposure to IPV
 - Often feel out of control of their lives
 - Parenting “out of control kids” seen as an extra stressor that they cannot handle
- Explore ways that mothers made efforts to protect their children.
- Take advantage of opportunities to partner with parent to enable her to better understand and respond to child's behaviors.
 - Regain sense of competence as a caregiver

For more information:

<http://promising.futureswithoutviolence.org/what-do-kids-need/guiding-principle/making-the-case-paradigm-shift/>

Recommendation #3

Let mothers and children know that it is **OK** to talk about what has happened *if the child would like to engage in this type of discussion.*



- Help mothers identify cues that their child may want to talk about the IPV.
- Let mothers know it's OK to talk about the IPV with their children – it won't hurt them to talk about it.
 - 'You look sad. I wonder if you'd like to talk about the hitting that has happened at home.'
- Children may need help describing their thoughts/experiences – help mothers be their facilitators.

Recommendation #4

Tell children that violence is not their fault.

If children say that the violence is their fault or that they should have stopped it, tell them directly that they are not responsible for violence between adults and that it is not their job to intervene.

Coach their mothers to say these things as well.

Children view the world ‘egocentrically’ and may feel violence is their fault.

- Even if they do not say this, take opportunities to let them know it is not their fault.
 - ‘Sometimes kids think they did something to make parents upset, but violence is never their fault.’
 - ‘Some kids think they could have stopped violence. That is never a child’s job.’

If a child does say they feel responsible,
say:

— ‘Violence is never your fault. Nothing
you did made that happen.’

• If a child says they should have
intervened, say:

— ‘I am glad you didn’t intervene. That
could have been unsafe for you.’

Recommendation #5



Foster children's self-esteem by showing and telling them that they are lovable, competent and important.

- *Building a child's self-esteem is a key component of resilience.*

- Children who live with violence need frequent reminders that they are loveable, competent and important.

- Identify activities that children enjoy and that help them feel successful.

If children
live with
approval,
they learn to
like themselves.

- Reinforce, and help mothers reinforce, positive behavior.
 - “Catch” the child’s good behavior
 - Reward that behavior with praise, attention, or special activity
 - “I like how you shared your toy. Let’s read a story together.”
 - Encourage mothers to provide physical comfort, following the child’s lead.

Recommendation #6



**Help children
know what to
expect.**

- A highly structured and predictable environment helps children to feel safe and in control.
- Establishing a structured environment can include having a regular schedule (meal times, bed times), consistent expectations and regular routines.
- Posting schedules may be helpful for older children.

Let children know 10-15 minutes before one activity is finishing and another is starting to give them time to shift gears.

- Encourage mothers to create their own routines. For example, a bed time routine might be a bath, putting on pajamas, reading a book and then singing a song.
- Help mothers plan for additional routines when they transition out of shelters.

For more information: <http://promising.futureswithoutviolence.org/what-do-kids-need/>

Recommendation #7

**Model and
encourage
good
friendship
skills.**



- Interest in friends and the skills to make good friends vary by age and developmental stage. The capacity to make friends begins within consistent and caring relationships in a child's early years.

Preschoolers are beginning to:

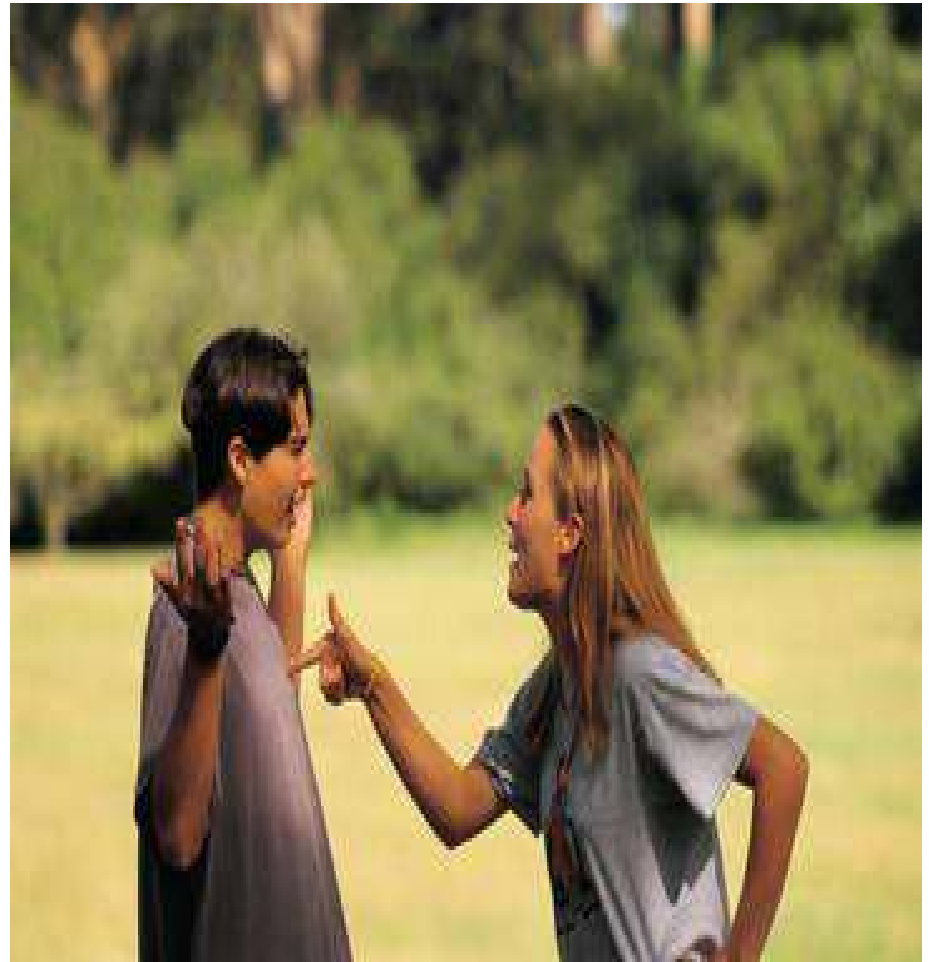
- Develop empathy--the ability to identify with and understand another person's feelings, situation, or motives
- Read non-verbal cues which is essential for the development of good social skills.

- Children 6-8 begin to:
 - Look outside the family for friends
 - Understand rules and social customs.
- For children age 9-10:
 - Friends are very important
 - Sports, clubs, organized group activities become important.

- Provide an environment for children that nurtures relationships with friends.
- Model the skills necessary to make and keep friends—such as empathy, kindness and respect for others.
 - *For younger children:* Model empathy; describe how others are feeling; use pretend play that incorporates awareness of others.
 - *For older children:* Provide activities and games that promote sharing, turn-taking, and learning about each other.
 - *For all children:* Give positive re-enforcement to children who show kindness and are considerate of others.

Recommendation #8

**Use emotion words to
help children
understand how
others might feel
during disagreements.**



Advocates can:

- Model sensitivity to the feelings of others
 - Use the language of feelings in your interactions with children
- Provide activities that focus on labeling and discussing feelings
 - *For younger children:* activities to identify feelings
 - *For older children:* “The Feelings Game”; stories that provide opportunities to talk about feelings

Recommendation #9

Recognize that when children are disruptive, they generally feel out of control and may not have the ability to use other strategies to express themselves.



- Children's difficult behavior may last long after the abuse has stopped and the child is safe.
- Children who have grown up with IPV may lack basic skills to regulate emotions.
- Children who have grown up with IPV learn to expect a high-threat environment.
- Provide anticipatory guidance and opportunities for the child to gain emotion regulation skills, such as:
 - Talking about the stress
 - Talking about what happens when the child loses control
 - Providing relaxation or meditation exercises for children.

Advocates can help parents:

- Deal with their feelings of helplessness, embarrassment or shame about their child's behavior
- Understand the reasons for the child's reactions
- Avoid responding with anger or threats
- Use a calm voice and manner in helping the child to regulate his behavior
- Devise effective strategies for intervening and helping the child to regain control of his emotions.

Recommendation #10

Incorporate the family's culture into interventions.

Support mothers and children to explore the values, norms, and cultural meanings that impact their choices and give them strength.



- A family's culture impacts:
 - Parent child relationships
 - The way a parent seeks help and support
 - How a parent understands her child's behavior and emotional reactions.
- Helping a family identify and maintain cultural traditions/practices provides connections to a larger social group and continuity with the past.
- Cultural awareness builds resilience and pride in children.

Advocates can:

- Model interest and appreciation for diversity
- Approach families with “respectful inquisitiveness” about their childrearing/parenting traditions and other cultural norms
- Act as a “cultural broker” when necessary, to inform parents of dominant parenting practices in this country (for example, the use of corporal punishment).

For more information:

<http://promising.futureswithoutviolence.org/program-readiness/programpractices/cultural-considerations/>

Recommendation #11

**Actively teach
and
model
alternatives
to
violence.**



Help children learn problem solving strategies

Problem Solving Steps



1. What is my problem?



2. Think, think, think
of some solutions



3. What would happen if...?
Would it be safe? Would it be fair?
How would everyone feel?



4. Give it a try!

Teach children how to engage in perspective-taking

- ‘Looks like John bumped into you in the hall. I wonder if that may have been an accident.’
- ‘Someone called Sarah a name. I bet that hurt her feelings.’



Recommendation #12

**Involve mothers in
conversations with
their
children about the
children's views
about
violence.**



Help mothers talk about the mixed feelings children may have about the abuser.

‘

I know it was scary to see me and dad fighting. You love and miss him too and that might be confusing. The fighting should not have happened but it's okay to love your dad.’

- Help mothers talk about children's opinions about whether violence is okay.
- Validate children's feelings while letting them know violence is not ok.
- Encourage mothers to participate in treatment with their children.



Recommendation #13



**Discuss child
development
with
mothers.**

Mothers in homes with IPV often report parenting stress, and describe inappropriate expectations for their young children's behavior.



- Discuss this development within the context of the child's age and exposure history.
 - For example, a two year old child who says “no” is not trying to be disrespectful or hurt the mother emotionally; he is learning autonomy and control in a developmentally appropriate way.
- Child-Parent Psychotherapy found that providing this education to parents improve positive parenting and reduce child adjustment problems.

Resources:

- www.Brightfutures.org
- Local pediatricians--many would be very happy to come and give a talk to moms about child development.



Recommendation #14

Help mothers
teach their
children how
to
label their
emotions.



Children learn through modeling



- Moms can “normalize” intense feelings for their children.
- When mothers help children recognize and cope with strong emotions, children gain a sense of mastery over them.
- Practicing this helps their child develop skills to manage their behavior and mood.

Recommendation #15

**Address
mothers
parenting
stress.**



Children's behavioral problems are reduced when:

- Mothers learn effective parenting skills
- Mothers are empowered to talk to their children about IPV
- Mothers practice self-care regularly
- Mothers report reduced parenting stress and increased self-efficacy as a parent
- Mothers are reminded that they are the most important person in their children's lives.

For more in formation:

<http://promising.futureswithoutviolence.org/what-do-kids-need/supporting-parenting/>

Recommendation #16

Work with mothers to help them extend both their own and their child's social support network.



- IPV isolates mothers and children in many ways.
- Encourage them to identify and build social supports including friends, family, community members, teachers, coaches, members of faith community and others.
- Access to these supports promotes resilience in children and helps them develop their own supportive relationships.

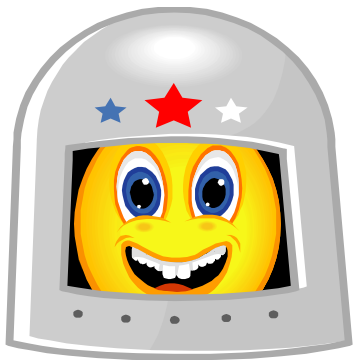
Trauma-informed practice includes caring for yourselves!

- Recognize the potential impact of vicarious trauma.
- Maintain awareness of your stressors and triggers.
- Discuss and reflect on your work with a supervisor/peers.
- Incorporate the practice of self care and awareness.



Support healthy parent-child relationships

- Affirm a mom's efforts to support or listen to her child.
- Help the house be a safe place for parents and children to live.
- Share information about child development.
- Ask a mom to step in to help keep her child calm or safe.
- Help a mom learn about her particular child's likes and dislikes.
- Ask a mom what she is proud of in her child.



Advocates can -

- Model respectful and nurturing relationships in their work with parents
- Help parents see the best in their children and in themselves as parents
- Help parents provide predictable, secure environments for their children
- Be strong role models for children and parents in their words and interactions with others.

For more information:

<http://promising.futureswithoutviolence.org/program-readiness/programpractices/>

Resources

- Promising Futures: Best Practices for Serving Children, Youth, and Parents Experiencing Domestic Violence: promisingfutureswithoutviolence.org
- The Center for the Developing Child: developingchild.harvard.edu
- The Child Witness to Violence Project: childwitnessstoviolence.org
- The National Child Traumatic Stress Network: Domestic Violence and Children: Fact Sheet for Advocates:

http://nctsn.org/sites/default/files/assets/pdfs/DomViolenceFactSheet_final.pdf

- Futures Without Violence: futureswithoutviolence.org
- The National Center on Domestic Violence, Trauma & Mental Health: nationalcenterdvtraumamh.org/

Culturally Specific Resources

- Asian & Pacific Islander Institute on Domestic Violence:
apiidv.org
- Casa de Esperanza: National Latin@ Network of Healthy Families and Communities:
casadeesperanza.org/nationallatino-network/
- National Indigenous Women's Resource Center: niwrc.org
- Institute on Domestic Violence in the African American Community: idvaac.org/

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Thank you!

Alejandro Palacios, Trainer
alejandro@acesdv.org





Thank you
Questions?



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Upcoming Webinar Schedule

January 26, 2016 – 11am	CLAS standards ADHS Language Access Group
January 26, 2016 – 1pm	Rural Women's Health Network- Brain Injury
February 23, 2016 – 12pm	Heart Health in Rural Arizona- College of Nursing
March 29, 2016 – 12pm	Farmworker Health Month
April 26, 2016 – 12pm	Sexual Assault
May 31, 2016 – 12pm	Update on Rural Men's Health- May Native Men's Health

Next webinar is scheduled for January 26th at 11:00am MDT

Go to <http://telemedicine.Arizona.edu/distant-education/upcoming-workshops>

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<https://www.surveymonkey.com/r/AzSORH>

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