



**GOVERNOR'S CONFERENCE
FOR THE PREVENTION OF CHILD ABUSE & NEGLECT
LEGAL INSTITUTE**

**The Impact of Child Trauma on System-Involved
Children and Youth in Kansas**

Part III

**Seven Essential Elements of Trauma-Informed
and Trauma-Responsive Child Welfare Systems**

**Part III Overview: Elements of Trauma-
Responsive Child Welfare Systems**

- Seven Elements
- Child and Family Review Services (CFSR) goals: safety, permanency, well-being
- Kansas CFSR results
- How trauma responsiveness can help Kansas children

What is a trauma-informed child welfare system?

A child welfare system with a trauma-informed perspective is one in which programs, agencies, and service providers:

1. Maximize physical and psychological safety for children and families
2. Identify trauma-related needs of children and families
3. Enhance child well-being and resilience

Adapted from NCTSN Child Welfare Trauma Training materials

What is a trauma-informed child welfare system?

4. Enhance family well-being and resilience
5. Enhance the well-being and resilience of those working in the system
6. Partner with youth and families
7. Partner with agencies and systems that interact with children and families

Adapted from NCTSN Child Welfare Trauma Training materials

Element #1: Maximize Physical and Psychological Safety

- Traumatic stress overwhelms a child's sense of safety; survival strategies for coping
 - A child and family that has experienced trauma can continue to feel unsafe
 - Psychological safety is critically important
- Trauma reminders can trigger “reenactment behaviors” in children and parents
- Examples of promoting safety:
 - Give children a sense of control
 - Deliver a safety message
 - Create safety plans
 - Help caregivers identify trauma triggers

Adapted from NCTSN Child Welfare Trauma
Training materials

Element #2: Identify Trauma-Related Needs of Children and Families

- Understand how children and families have been impacted by trauma:
 - Trauma screening (front-line worker); positive screen can trigger referral for assessment
 - Trauma assessment (mental health provider)
 - Psychological evaluation (to answer specific referral question, by court-approved evaluator)
- Importance of trauma screening for parents

Adapted from NCTSN Child Welfare Trauma
Training materials

Element #3: Enhance Child Well-Being and Resilience

- Child welfare system should recognize and build on children's existing strengths, continuity of children's relationships
- Traumatized children need access to evidence-based trauma treatments
- Traumatized children can develop resilience
 - Resilience is the ability to overcome adversity and thrive in the face of risk
 - Neuroplasticity allows for rewiring of neural connections through corrective experiences

Adapted from NCTSN Child Welfare Trauma Training materials

Element #3: Enhance Child Well-Being and Resilience

- Being separated from an attachment figure can be very stressful
 - Maintaining positive connections enhances psychological safety and resilience
- In order to form positive attachments, stability and permanency are critically important
- Evidence-based, trauma-informed treatment and services also increase resilience
 - Child welfare workers should select therapists familiar with available evidence and best able to evaluate and treat trauma symptoms

Adapted from NCTSN Child Welfare Trauma Training materials

Element #4: Enhance Family Well-Being and Resilience

- Families play a critical role in protecting children from harm and enhancing their natural resilience
 - Support from caregivers is a key factor influencing children’s psychological recovery from trauma
 - Support and guidance for the child’s family and caregivers is part of federal CFSR goals
- Parents often have their own trauma history
 - May also have secondary traumatic stress from their children’s trauma
 - Trauma history can compromise parents’ ability to make appropriate decisions, form relationships, and regulate emotions

Adapted from NCTSN Child Welfare Trauma Training materials

Element #4: Enhance Family Well-Being and Resilience

- Child welfare workers have a critical role:
 - Identify and enhance family strengths
 - Screen birth parents for trauma history
 - Educate parents about trauma reminders
 - Refer parents for trauma-informed services
- Child welfare workers help resource parents:
 - Resource families may feel overwhelmed by the child’s traumas and/or their own
 - Providing trauma education and support enhances placement stability and promotes permanency

Adapted from NCTSN Child Welfare Trauma Training materials

Element #5: Enhance the Well-Being and Resilience of Child Welfare Workers

- Secondary traumatic stress can develop
- Child welfare agencies can:
 - Collect information about STS (“compassion fatigue”)
 - Implement strategies and practices that build resilience and help staff manage stress
 - Address the impact of STS on individuals and on the system as a whole
- Promoting system resilience means implementing strategies to help workers manage the occupational hazard of STS and addressing its impact in a systematic way

Adapted from NCTSN Child Welfare Trauma
Training materials

Element #6: Partner with Youth and Families

- Families and youth need to have choices and an active voice in decisions
 - Experience with system → valuable feedback
- Examples of benefits:
 - Empowers youth and families
 - Builds trust
 - Enhances helping relationship
 - Improves quality of services
 - Increases placement stability and timely permanency

Adapted from NCTSN Child Welfare Trauma
Training materials

Element #6: Partner with Youth and Families

- Strategies:
 - Clear, honest, respectful communication
 - Commitment to strengths-based, family-centered, and youth-driven practice
 - Shared decision making, participatory planning
 - Seek feedback on a regular basis
 - Assess your own practice; agency self-assessments

Adapted from NCTSN Child Welfare Trauma
Training materials

Element #7: Partner with Agencies and Systems that Interact with Children and Families

- Cross-system collaboration enables all helping professionals to see the child as a whole person, thus preventing potentially competing priorities and messages
- Collaboration promotes cohesive care and better outcomes
- Examples of strategies:
 - Cross-training on trauma and its impact
 - Jointly developed protocols to promote resiliency
 - Multi-disciplinary teams
 - All systems engaged in shared outcomes
 - Integrated information sharing systems

Adapted from NCTSN Child Welfare Trauma
Training materials

Why does it matter?

The research is clear that the experience of abuse or neglect leaves a particular traumatic fingerprint on the development of children that cannot be ignored if the child welfare system is to meaningfully improve the life trajectories of maltreated children, not merely keep them safe from harm.

--Bryan Samuels, Commissioner for the Administration on Children, Youth, and Families

Why does it matter?

Simply moving a child out of immediate danger does not in itself reverse or eliminate the way that he or she has learned to be fearful. The child's memory retains these learned links, and such thoughts and memories are sufficient to elicit ongoing fear and make a child anxious.

--National Scientific Council
on the Developing Child (2010)

Child and Family Review Services

- CFSR is a service provided by the Children's Bureau of the federal Administration for Children & Families
- Key Child and Family Services Review goals:
 - Safety
 - Permanency
 - Well-being

Kansas CFSR

- CFSR measures a state's performance on national standards for 7 statewide data indicators (child and family outcomes and systemic factors)
- In Kansas, reviewers used the results of 65 case reviews between April 1, 2015 and May 22, 2015, plus interviews and focus groups

Kansas CFSR Results

- Positive: keeping children with siblings and placing with relatives; meeting educational needs of children
- Needs work: safety assessments inadequate; CINC-NAN cases do not require face-to-face interviews with children
- Clearer process for termination of parental rights needed

Permanency and stability of living situation in Kansas

- Not in substantial conformity (only 43% substantially achieved)
- Why?
 - Children's Rights argues that foster care reimbursement rates are too low in Kansas and need to be boosted by up to 31%
 - A University of IL study suggests that 34% of children experience instability because of their behavior (resource parent requests change)
- Is this a problem?
 - Multiple placements increase behavior/emotional problems, education problems, juvenile delinquency

What might help promote stability? Trauma-informed child welfare practice.

- Untreated traumatic stress reactions may lead to placement disruptions that in turn intensify problem reactions and behaviors
 - Untreated trauma can lead to stacked trauma, which can amplify instability
- Training helps
 - Training for parents and caregivers regarding child traumatic stress
 - Training for parents and caregivers regarding secondary traumatic stress

Example: pilot to study foster children with SED in Kansas

- Kansas Intensive Permanency Project, a federal HHS grantee: University of Kansas, Kansas DCF, and the two private providers
- Target population: 3-16 years old and has severe emotional disturbance (SED)
- Treatment focus: **parents**. The five variables with strongest correlation to long term foster care for SED kids were:
 - parenting competency;
 - parental mental health;
 - poverty-related issues;
 - parental substance abuse;
 - parental history of trauma