

Part 2: Preventing Trauma in Children with Intellectual or Developmental Disabilities



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About SAFE

Vision: A just and safe community free from violence and abuse

Mission: To stop abuse for everyone

24/7 SAFEline for support & access to all services

Hotline: 512-267-7233

Textline: 737-888-7233

Chatline: safeaustin.org/chat







Training for people with disabilities on topics including personal safety, healthy relationships, and safer sexuality

Information, technical assistance, and training for:

- disability service organizations
- victim service professionals (domestic & sexual violence)
- criminal justice staff
- family members and other stakeholders

Working with community partners to recognize and address gaps in services for people with disabilities



Trauma and trauma responses in children

Abuse of people with disabilities



Violence is most often perpetrated by someone people know and trust

- 97-99% of victims with intellectual disabilities knew and trusted their abuser
- 44% had a relationship specifically due to the disability

Abuse can occur anywhere, but the risk is much greater in closed, institutional settings



(Baladerian, 1991)



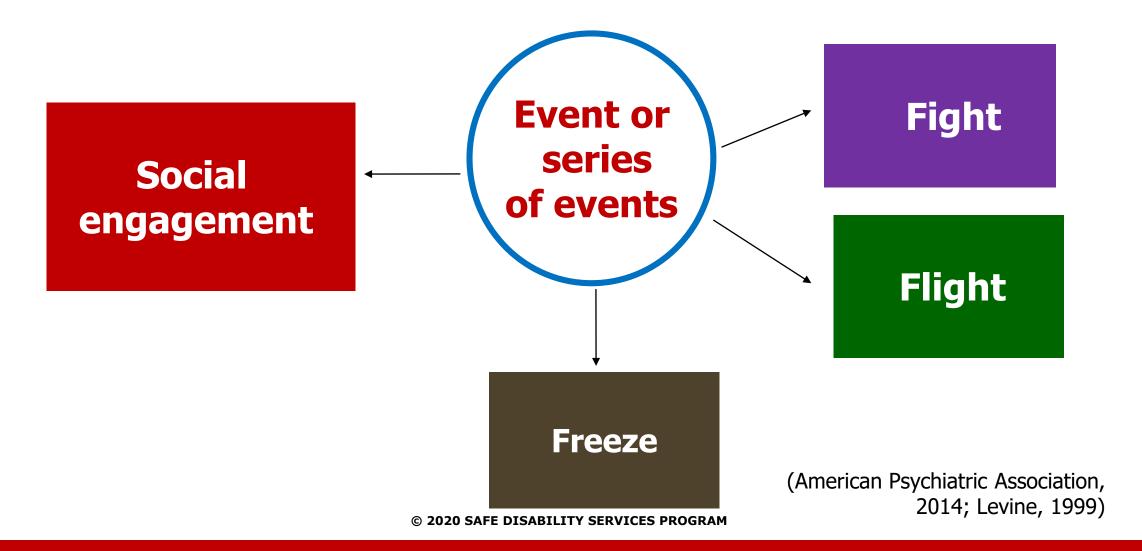
At-risk for other trauma

- Traumatizing incidents of physical restraint & seclusion
- Higher rates of serious injury compared to peers without disabilities
- Increased risk of emotional distress due to medical procedures



(Sullivan, 2006; Sedlak, et al., 2010; Sullivan & Knutsen, 2000.)

TRAUMA: WHEN TOO MUCH HAPPENS TOO FAST





What can fight & flight look like behaviorally?

- Oppositional
- Engaging in power struggles
- Aggressive
- Explosive
- Hands clasped in fists
- Hitting, kicking, spitting, throwing things



(Levine, 2012; Kline, & Downing)



What can fight & flight look like behaviorally?

- Angry outbursts- screaming
- Overly talkative
- Hyperactive
- Restlessness or excessive fidgeting
- Leaving/running
- Darting eyes



(Levine, 2012; Kline, & Downing)



What can freeze look like behaviorally?

- Daydreaming,
- Difficulty paying attention
- Holding breath
- Headaches, stomach problems
- Low energy, flat affect, not responding to interaction
- Isolating, withdrawn
- Extreme sensitivity to noise



(Levine, 2012; Kline, & Downing)

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A trauma response can be the result of a trauma reminder...

- Hunger or Thirst
- Sudden change
- Transitions (place or activity)
- Sensory overload
- Unpredictability
- Feeling lack of control or chaos
- Feelings of vulnerability or rejection

- Loss
- Loneliness
- Lack of attention
- Confrontation
- Getting "in trouble"
- Praise or Attention
- Calm



All behavior is communication

Pay attention to possible abuse indicators:

- Signs of physical abuse
- Physical ailments: headaches, stomach aches

Pay attention to behavioral indicators:

- Increase in fear (places/people) & distrust
- Changes in mood, appetite, sleep patterns
- Loss of skills previously gained
- Angry outbursts (fight)
- Withdrawing, isolating (flight/freeze)





Trauma-informed care in practice



Trauma-informed values

Safety: Will I be safe here and with you—physically *and* emotionally?

Trustworthiness: Can I believe in you to tell me the truth and be honest?

Choice: Will I be able to make decisions or are you making all of the decisions for me?

Collaboration: Will you tell me what to do or will you work with me?

Empowerment: Will you support me to find and use my own voice? (Fallot, 2011)



Ingredients for recovery

Safety

Empowerment

Connection

(Harvey, 2012)



Keys to safety: Meeting needs



- Predictable day & people
- Staff: responsive, caring, kind
- Providing physical & emotional comfort
- Physical safety (from others and self)
- Engagement
- Safe person
- Build trust with honest communication

(Harvey, 2012 & Campbell, 2012)



Keys to empowerment: Choice

- Provide options and give time to make decisions
- Provide *real* choices, not fake ones.
- Real input into daily life



Making choices helps develop the frontal cortex of the brain. (Harrow 2012 & Comphell 2012

(Harvey, 2012 & Campbell, 2012)



Keys to connection: Listening

- Listen: Verbal and nonverbal communication
- Consistent time
- Body language, eye contact
- Reflecting
- Attentive and responsive to interaction
- Follow through



(Harvey, 2012)



Interventions & supports

- Prevent sensory overload
- Grounding with animals/pets/nature/ music/breathing
- Opportunities for creative expression
- Sleep





Strengthening protective factors

- Promote secure attachment
- Address the trauma of parents/caregivers
- Promote a healing and protective environment
- Partnerships between parents, other caregivers, and professionals to form a recovery team
- Families are connected with IDD and trauma-informed support and services

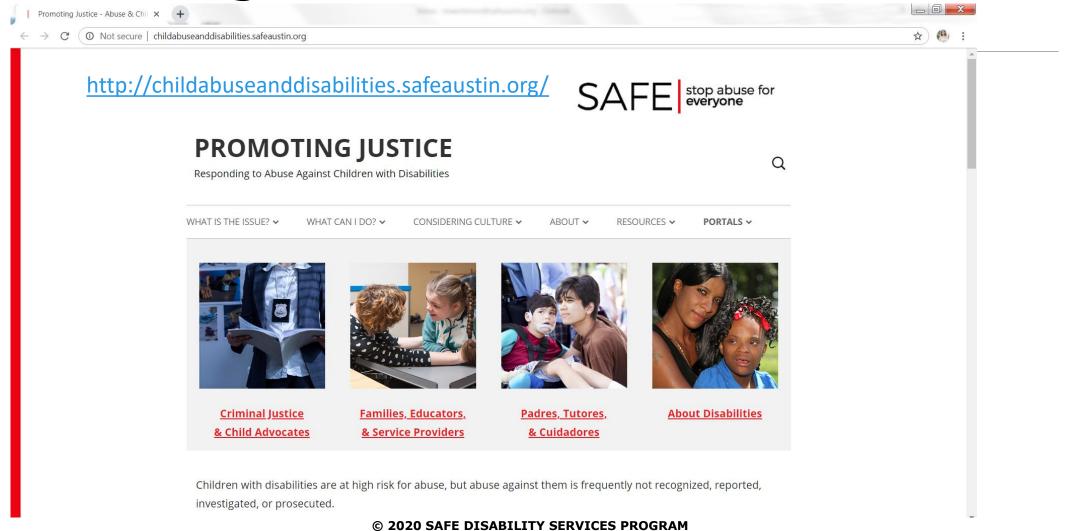


From: Road to Recovery: Supporting children with intellectual and developmental disabilities who have experienced trauma. Hogg Foundation for Mental Health.

Children's Justice Act Grants

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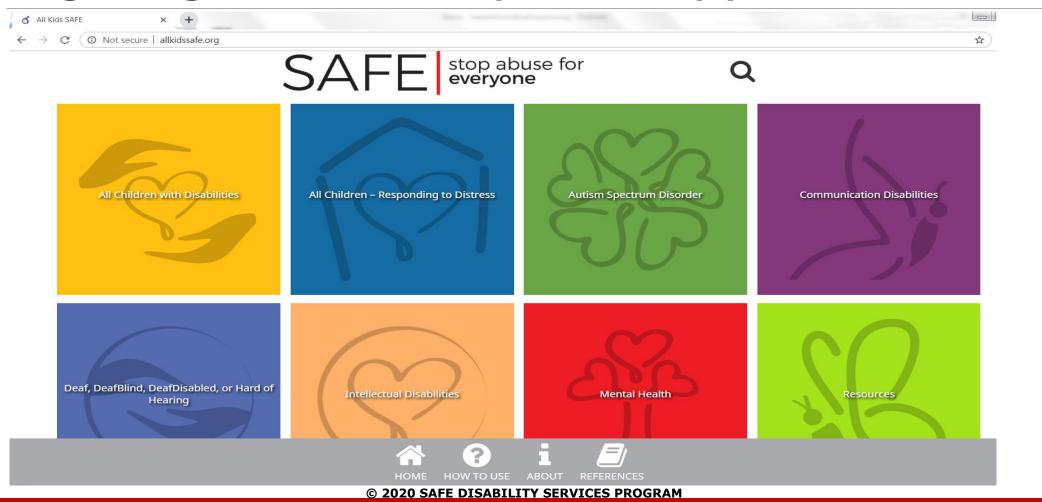
Promoting Justice website



Children's Justice Act Grants



Digital guide/smart phone app





Self-care for caregivers and providers



Practicing self-regulation

Simple activities that can help us settle and be present:

- 1. Focus on your breathing
- 2. Notice where your body makes contact
- 3. Look around the room and see where your eyes naturally go what catches your attention?
- 4. Chit chat for a moment shift your attention to something pleasant
- 5. Check in with your body. What changed?

(Levine, 2012; Kline, & Downing)



Take it easy on yourself!

- 1. Give yourself a hug containment.
- 2. Talk with someone calm or someone you trust.
- 3. Find something you like to look at.
- 4. Take time to walk around, stretch, drink water.
- 5. Take time to notice how your energy is shifting and settling.
- 6. Stay connected to others
- 7. Don't isolate.



(Levine, 2012; Kline, & Downing)



References

American Psychiatric Association. (1994). *Diagnostic and Statistical Manual of Mental Disorders (DSM IV)*, Fourth Edition, Washington, D.C.

Balderian, N. (1991). Sexual abuse of people with developmental disabilities. Sexuality and Disability, 9(4), 323-335

Baladerian, N.J., Coleman, T.F. & Stream, J. (2013). Abuse and people with disabilities: Victims and their families speak out. A report on the 2012 national survey on abuse of people with disabilities. Spectrum Institute; Disability and Abuse Project.www.disabilityandabuse.org/survey/survey-report.pdf

Campbell, R., (December 2012). *Implications for First Responders in Law Enforcement, Prosecution, and Victim Advocacy*. NCJ 240953.

Curran, L. (2013) 101 Trauma Informed Interventions. Activities, Exercises and Assignments to Move the Client and Therapy Forward. PESI Publishing and Media, Eau Claire, WI.

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References

Jones, L., Bellis, M. A., Wood, S., Hughes, K., McCoy, E., Eckley, L., et al. (2012). Prevalence and risk of violence against children with disabilities: A systematic review and meta-analysis of observational studies. Lancet, 380, 899-907.

Kline, M. & Downing, K. (2012). Based on the work of Peter Levine work and Somatic Experiencing (SETI); (2012)

Levine, P.A. (1999). *Healing Trauma: Restoring the Wisdom of the Body*, Boulder, CO: Sounds True, Inc.

National Child Traumatic Stress Network. What is child traumatic stress? Fact Sheet.

Sullivan, P. & Knutson, J. (2000). Maltreatment and disabilities: A population-based epidemiological study. *Child Abuse and Neglect, 24(10), 1257-1273.* Retrieved from http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.459.721&rep=rep1&type=pdf

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References

- Elliott, D. E., Bjelajac, P., Fallot, R. D., Markoff, L. S., and Glover Reed, B. (2005). Trauma-Informed or Trauma-Denied: Principles and Implementation of Trauma-Informed Services for Women. *Journal of Community Psychology*, (33, 4), 461-477. Published online in Wiley InterScience (www.interscience.wiley.com). DOI: 10.1002/jcop.20063
- Fallot, R. D. (2011, January 28). *Trauma-informed care: A values-based context for psychosocial empowerment*. Institute of Medicine Workshop on Preventing Violence against Women and Children. Washington, DC.
- Harvey, K. (2012, February 20). *Trauma-informed care for people with intellectual disabilities and behavioral health challenges.* Presentation at the Hogg Foundation for Mental Health, Austin Texas.
- Herman, J. (1992). *Trauma and Recovery*. Harper Publishing
- National Traumatic Stress Network. (2015, November). *Road to Recovery: Supporting children with intellectual and developmental disabilities who have experienced trauma.* Hogg Foundation for Mental Health.

SAFE stop abuse for everyone

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For Deaf/HH/Deaf-Blind community, use relay/VRS

www.safeaustin.org