Traumatic Stress and the Child Welfare System

Traumatic events cause overwhelming feelings of terror, horror, or hopelessness. These kinds of feelings often occur when a person experiences or witnesses a serious injury, or witnesses a death. A person may also be traumatized by threats of injury or death, or by experiencing other forms of attack or violation. Child traumatic stress occurs when exposure to traumatic events overwhelms the child’s ability to cope.

This issue of *Focal Point* focuses on child traumatic stress, particularly the kinds of stress most commonly found among children and adolescents who are involved with the child welfare system. We (the RTC on Family Support and Children's Mental Health at Portland State University) and the National Child Traumatic Stress Network (NCTSN) have worked together to provide this summary of what is currently known about the effects of child traumatic stress and the most effective treatments.

Traumatic stress can arise in the context of war, endemic community violence, or natural disaster. In this issue, however, we focus on traumatic stress that arises in the context of families and within the systems that are designed to protect children when their families cannot. Children who enter the child welfare system are typically affected by abuse, neglect, and/or domestic violence. If they are removed from their homes, they often face further traumas that are caused by efforts to remedy the situation. Children's relationships with caregivers and other family members are ruptured, they are uprooted from friendships and familiar surroundings, and their daily routines are destroyed. Often, children face ongoing uncertainty and instability that can continue for years.

We know that a strong relationship with a caregiver is by far the most potent buffer against child traumatic stress. This is precisely the asset that children involved with child welfare typically lack. When children lack a secure bond with a caregiver, they are highly vulnerable to the immediate effects of trauma. Additionally, when traumatic stress is left untreated—or when it is compounded by ongoing experiences of instability and uncertainty in the absence of a strong attachment to a caregiver—problems begin to multiply and can impact every area of a child’s functioning. Cognitive, attentional, and emotional resources that are normally devoted to learning, exploring, and developing are instead devoted to coping and survival strategies. While these strategies may work to protect the child in the short run, they are often maladaptive in the long run, resulting in problems with forming healthy attachments, regulating attention and emotion, and learning. In turn, these cascading problems leave children vulnerable to further traumas and victimization, and increase the likelihood of school failure, substance abuse, and involvement in antisocial activity.

Later on in their lives, we may encounter these young people as “multi-system kids”: runaways, delinquents, substance abusers, and dropouts, often carrying labels like “oppositional defiant” or “conduct disordered.” We also encounter other youth with similar problems, many of whom experienced abuse, neglect, domestic violence, or other traumatic stressors but who did not come to the attention of child protective services. As adolescents, these young people may appear undeserving of sympathy. It is easy to see them as willfully “bad” kids, and often they are not particularly receptive to our efforts to help.

Intervening early and effectively can help traumatized children recover. Even severely traumatized children like Aaron Weaver (page 9 in this issue) can thrive when they find safety and love, and when they have opportunities to learn how to manage the enduring aftereffects of trauma. Understanding the ways that traumatic experiences impact young people can make us more alert to possible traumas that lurk in the life histories of “bad” and highly troubled adolescents we encounter in human service settings. Being knowledgeable about child traumatic stress can help us respond more sympathetically and responsibly to their needs. The goal of this *Focal Point* issue is to help build the knowledge and understanding that supports effective efforts to help young people recover from the effects of trauma.

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