



Exploring Child Welfare's Frontier - Issue 2

Trauma Informed is not Enough: Resilience for Children Living in a Trauma Uninformed World

It is impossible to overstate the importance of infusing trauma informed practice into the work we do with children and families who encounter the child welfare system. Child welfare staff in all domains (child protection, foster care, education, juvenile justice, etc.) should understand the impact of trauma, recognize its manifestations, create environments that avoid re-traumatization, and support children and families in their efforts to recover. However, if we stop here then we're likely to miss a critical element that helps traumatized populations thrive: resilience.

Our discussion today is rooted in two ideas. First, children experiencing abuse and neglect trauma (including the trauma of being removed from their homes) do not have uniform responses to that trauma. Second, while creating trauma informed treatment for children in care is essential, it is unlikely that children will leave care to environments that are trauma informed. Much of the current discussion in Texas on trauma informed care focuses on answering *how can we as professionals ensure our treatments and interactions help children and youth recover from trauma, and ensure that we do no re-traumatize?* However, there is another question to which we must also turn, *how can we instill the internal strength and external support necessary for children and youth to successfully operate with the trauma uninformed?* The answer to this question may be resilience.

Differences in Responses for Traumatized Children and Youth

Again, it is important to emphasize that the evidence is clear, children exposed to prolonged and repeated trauma manifest serious and ongoing symptoms that require a very specific type of treatment:

Children who have experienced such trauma are likely to maintain a state of hyperarousal and hypervigilance (constantly prepared for fight, flight, or freeze; hypersensitive with a tendency to overreact to, or misinterpret, actions of others or certain elements in their environment that would go unnoticed by others) due to experiencing harmful events in the home, and by parents or caregivers (Parris, et al 2014)

That being said, let's examine our first idea: children do not have uniform responses to trauma. There's a key phrase in the above quote which supports this notion: "a tendency to..." The literature supports this subtle qualification. For some children the road to recovery is long and challenging while others seem to bounce back more quickly. If our goal is to improve outcomes for traumatized children, then we should embrace the differences in responses and learn from those who are able to recover and thrive. Several studies have found that it's resilience that allows some children to thrive in the face of trauma. In a 2017 study by Casey Family Programs, researchers write that *children experiencing ACEs had higher rates of physical, emotional, mental, and behavioral health issues and much lower rates of school engagement and flourishing. However, these effects were significantly reduced among children who were reported to be usually or always resilient.* So just what is resilience?



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What is Resilience? Why does it matter?

Resilience is another of those elusive concepts (not unlike "trauma informed") that can be difficult to define. Below is just a sampling of definitions:

- "the individual's capacity for adapting successfully and functioning competently despite experiencing chronic stress or adversity, or following exposure to prolonged, or severe, trauma" (Cicchetti and Rogosch, 1997)
- "when children show a normal range of competence across several domains of functioning" (Afifi and MacMillan, 2011)"
- "adaptive characteristics of an individual to cope with and recover from adversity" (Lacoviello and Charney, 2014)
- "children whose parents responded that their child is usually or always able to stay calm and in control when faced with a challenge' (Sege et al, 2017)

Despite the diversity of definitions, there are some unifying traits:

- Resilience is a keystone characteristic in a trauma survivor's ability to not only recover but thrive.
- Resilience is not a static quality, but dynamic. It is also not innate, but something that can be learned and taught.
- Resilience consists of internal characteristics, relationships, and environmental variables.
 - Internal characteristics: self-confidence, self-control, clear definition of the self, optimism, cognitive flexibility, active coping skills, embracing a personal moral compass
 - Relationship Characteristics: a supportive social network, nature of the relationship with biological parents, or having a mentor who exhibits strong resilience
 - Environmental variables: active abuse as opposed to neglect, a stable family, less severe sexual abuse experiences, no history of juvenile arrests, etc.

An encompassing definition of resilience might read: *the ongoing growth and development of internal characteristics, relationships, and environmental variables that allow a trauma survivor to thrive in a trauma uninformed world.*

So why is this concept important? The child welfare paradigm has shifted to a trauma informed lens focused on creating environments where children can recover. However, this only focuses on one side of the coin. Ensuring a trauma understanding does little to ensure that traumatized children have the tools they need to thrive in trauma uninformed settings. By pairing resilience developmental with the knowledge of trauma manifestations, we give the child serving community information needed to avoid re-traumatization and the methods needed for building mechanisms to achieve positive outcomes.



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Where we go from here: Texas's Journey

Much work has been done throughout Texas in the sectors that serve children, youth, and families suffering from trauma. While the work can at times seem scattered or haphazard, there has nevertheless been a concerted and successful effort to drive child welfare toward being trauma informed. For a full cataloging of those efforts in Texas, see the July 2017 Meadows Mental Health Policy Institute of Texas's Trauma Informed Care Report. It provides several examples of areas where trauma informed (and even resilience focused) efforts have been implemented throughout the state. Additionally, the Texas Supreme Court Children's Commission is currently leading a Statewide Collaborative on Trauma Informed Care designed to infuse trauma informed practices, policies, trainings across systems that serve traumatized children youth and families.

Some argue (reasonably) that we as a community must lay a trauma informed foundation before shifting our focus toward resilience. With a few notable exceptions this is the path Texas child welfare is currently walking. While compelling, this argument centers on the idea of linear path from trauma informed to positive outcomes. We must instead walk parallel paths between trauma informed and resilience building. This is especially true knowing that the world is not trauma informed, and no matter how children and youth leave care they will most likely be leaving to a trauma uninformed setting.

So how can we walk the paths of both trauma informed recovery and resilience building? It could be through Positive Psychology, the methods used in Fostering Resilience – Reaching Teens©, etc. As you explore the resources below, remember:

- Expand your thinking beyond trauma. Don't forget that it's resilience that allows us to thrive after enduring the worst humanity has to offer.
- Children and youth are most likely to leave our care and enter a trauma uninformed world. Teaching them resilience can help them thrive in these settings.
- The journey to well-being is not a linear one from trauma informed to positive outcomes. We must instead walk down the trauma informed and resilience building paths simultaneously.

Current brain and social sciences have shed light on the impact of childhood adversity, risks, and toxic and negative factors impacting healthy child development. Yet this focus can only go so far in prescribing what is needed for a thriving society....an exclusive focus on adverse experiences risks labeling children and their families, and it neglects to turn attention toward the possibility for flourishing even in the face of adversity (Casey Family Programs, 2017)



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Resources for Further Exploration

[Casey Family Programs: Balancing ACEs with HOPE](#)

[Child and Youth Resilience Measure developed by Dr. Michael Ungar](#)

[American Psychological Association - Road to Resilience](#)

[TED Talk - How to Make Stress Your Friend](#)

[Children's Bureau - Developing a Trauma Informed Child Welfare System](#)

[Meadows Trauma Informed Care Report](#)

References

"An examination of the relationships between professional quality of life, adverse childhood experiences, resilience, and work environment in a sample of human service providers" by Amanda R. Hiles Howard, Sheri Parris, Jordan S. Hall, Casey D. Call, Erin Becker Razuri, Karyn B. Purvis, and David R. Cross in *Child Youth and Services Review* (2015)

"Balancing Adverse Childhood Experiences (ACEs) With HOPE* New Insights into the Role of Positive Experience on Child and Family Development" by Robert Sege, Christina Bethell, Jeff Linkenbach, Jennifer A. Jones, Bart Klika, and Peter J. Pecora published by *Casey Family Programs* (2017)

"Factors Promoting Resilience Following Childhood Sexual Abuse: A Structured, Narrative Review of the Literature" by Clare Marriott, Catherine Hamilton-Giachritsis, and Chris Harrop in *Child Abuse Review* (2014)

"Implementing Trust-Based Relational Intervention® in a Charter School at a Residential Facility for At-Risk Youth" by Sheri R. Parris, Moe Dozier, Karyn B. Purvis, Charlsie Whitney, Amy Grisham, & David R. Cross in *Contemporary School Psychology* (2014)

"Psychosocial facets of resilience: implications for preventing posttrauma psychopathology, treating trauma survivors, and enhancing community resilience" by Brian M. Iacoviello & Dennis S. Charney in *European Journal of Psychotraumatology* (2014)

"Recovery: Resilience and Growth in the Aftermath of Domestic Violence" by Kim M. Anderson, Lynette M. Renner, and Fran S. Danis in *Violence Against Women* (2012)

"Relational Trauma and Traumawise Care: A Concise and Contemporary Overview" by David Cross (2018)

"Resilience Following Child Maltreatment: A Review of Protective Factors" by Tracie O Afifi, Harriet L MacMillan in *The Canadian Journal of Psychiatry* (2011)

"The role of self-organization in the promotion of resilience in maltreated children" by Dante Cicchetti and Fred A. Rogosch in *Development and Psychopathology* (1997)