

# GRAND RESOURCE

*Help for Grandfamilies Impacted by Opioids and Other Substance Use*



**generations united**

Because we're stronger together\*



This program is supported by Senior Resources – Agency on Aging with Title III funds made available under the Older American's Act.

# Addressing Childhood Trauma

*"I thought because my grandkids were babies (6 months, 1 ½, 2 ½) they were not going to have any problems. Boy was I wrong! They had problems with separation anxiety; it was so painful to see them go through this. I had to tell them a hundred times a day how much I loved them and was never going to leave them."*

**Delia Martinez, Grandparent caregiver, Texas**

Most babies, children, and youth have traumatic experiences<sup>1</sup> before going to live with their grandparents, aunts, uncles, or other relatives in grandfamilies.<sup>2</sup> More than half of children involved with the child welfare system<sup>3</sup> have experienced at least four adverse childhood experiences (ACEs), leaving them 12 times more likely to have negative

health outcomes than the general child population.<sup>4</sup> Fortunately, research shows that grandparents or other relatives who step in to care for a child whose parents cannot, play a protective role in the child's life that can help reduce trauma and mitigate its impact. Compared to children in foster care with non-relatives, children in foster care with relatives have more stability, better mental and behavioral health and are more likely to report always feeling loved.<sup>5</sup> Yet, grandparents and other relatives raising children are less likely to have access to many important resources and supports that children in foster care with non-relatives receive.

## What is trauma?

Trauma is an emotional shock that follows a stressful event or a physical injury, which may lead to long-term mental health issues.<sup>6</sup>

## What types of events cause trauma?

Any event, series of events, or set of circumstances that is physically or emotionally harmful can cause trauma.<sup>7</sup> Traumatic experiences include abuse, neglect, serious accidents or illness, community or school violence, experiencing or witnessing domestic violence, commercial sexual exploitation, and sudden or violent loss of a loved one.<sup>8</sup> Traumatic events can be especially damaging when they happen in childhood. Research shows that people who have had multiple adverse experiences in childhood have a greater risk of negative health outcomes in adulthood. Known as ACEs, adverse childhood experiences that have a demonstrated connection to trauma include child abuse and neglect, parental substance use, or death of a parent. These experiences are common among children before they come to live in a grandfamily.

## How common is trauma in children?

More than two-thirds of children experience at least one traumatic event by age 16.<sup>9</sup> More than eight million children younger than 18 years old live with at least one adult who has a substance use disorder.<sup>10</sup> This is more than one in 10 children in the United States. While not all children living with a person with a substance use disorder experience trauma, many do.

## How common is trauma among children who come to live in grandfamilies?

While there is no national data on the prevalence of childhood trauma among children in grandfamilies, research shows that more than half of the children in the child welfare system have had four or more adverse childhood experiences (ACEs) compared to 13% in the general population. About one-third of children in foster care are in foster care with relatives.<sup>11</sup>

## What are the impacts of childhood trauma?

Traumatic experiences can have a lasting impact on a child.<sup>12</sup> Many will not experience life-long effects of their trauma, but some do have difficulties and experience traumatic stress reactions.<sup>13</sup> Children who have experienced traumatic events may have learning problems, increased involvement with child welfare and juvenile justice systems, and other long-term health problems.<sup>14</sup> Trauma can also cause children to act out or misbehave. Trauma is a risk factor for the majority of behavioral health and substance use disorders, but that does not mean children who have experienced trauma will necessarily have these challenges.<sup>15</sup> Grandfamilies can help mitigate the impact of trauma on children by playing a protective role in their lives, providing stability and building their senses of self-worth and self-esteem.

## Crisis Hotlines

- Child Sexual Abuse: Stop It Now! 1-888-PREVENT (1-888-773-8368)
- Crime Victims: National Center for Victims of Crime 1-855-4VICTIM (1-855-484-2846)
- Dating Abuse: Love is Respect 1-866-331-9474 TTY: 1-866-331-8453, or Text LOVEIS TO 22522
- Domestic Violence: National Domestic Violence Hotline 1-800-799-SAFE (1-800-799-7233); TTY: 1-800-787-3224
- Missing and Abducted Children: Child Find of America, Inc. 1-800-I-AM-LOST (1-800-426-5678); OR National Center for Missing & Exploited Children 1-800-THE-LOST (1-800-843-5678)
- Rape and Sexual Abuse: Rape, Abuse, & Incest National Network (RAINN) 1-800-656-HOPE (1-800-656-4673)
- Runaway and Homeless Youth: National Runaway Safeline 1-800-RUNAWAY (1-800-786-2929) or Text: 66008
- Suicide Prevention: National Suicide Prevention Lifeline 1-800-273-TALK (1-800-273-8255); TTY: 1-800-799-4889

What does trauma look like?

Trauma varies based on the age and developmental stage of the child, but regardless of age trauma may cause behavior issues.

## Preschool-aged Child<sup>16</sup>

- \* Scared of being separated from their caregiver
- \* Excessive crying and/screaming
- \* Poor eating habits
- \* Loss of appetite or weight
- \* Nightmares

## Elementary School Child<sup>17</sup>

- \* Easily become anxious or fearful
- \* Hard time concentrating
- \* Difficulties with sleep
- \* Feel guilt or shame

## Middle and High School Child<sup>18</sup>

- \* Feel depressed or alone
- \* Eating disorders
- \* Self-harm
- \* Misuse of alcohol or other drugs
- \* Engage in risky sexual behaviors

While these are common examples, it is important to recognize that trauma impacts each child differently. If you are concerned that the child you're raising is experiencing trauma, it is important that you speak with a professional to help identify it and work collaboratively to help the child heal.

### What can I do to help a child who has trauma?

Identifying and then addressing a child's trauma is a vital part of the healing process, but know that you do not have to work to address their trauma on your own. Talk to the child's pediatrician about what the child has been through and how they have been reacting.<sup>19</sup> Talk with their teachers, school administrators, and school counselors about services the school offers for students who have experienced trauma.<sup>20</sup> These counselors will not typically provide therapy or individualized counseling, but they can connect you to resources. Additionally, you can reach out to the child's health insurance provider to explore the services they offer and ask for a referral to trauma-informed services. By making sure the child has a supportive caregiving network and access to any treatment or service systems, you can help address their trauma and reduce the risk for lasting health effects.

You can also help by talking with them about their fears and worries to reduce distress and open communication about these difficult events. It's advisable to talk with a professional first to ensure the conversation is safe, supportive, and does not trigger additional trauma.

People who have experienced trauma may have certain "triggers" that can prompt them to recall a traumatic experience. These triggers may take a variety of forms and can often be subtle and difficult to predict. Examples might include smelling a scent, being asked about a specific event, seeing a particular object or going to a certain location. Try to learn your child's triggers and how to reduce their impact. A therapist can be a helpful resource in this process.

### What is traumatic grief?

Children who have lost a parent or other loved one may experience traumatic grief. Regardless of how a loved one died, children may experience traumatic reactions. When grieving children have ongoing difficulties that impact their daily life and/ or make it difficult for them to recall positive memories of their loved one<sup>21</sup> and if these responses are severe or prolonged, the child may be experiencing childhood traumatic grief.<sup>22</sup>

### How can I help a child experiencing traumatic grief?

Consider what is age appropriate to tell them about how their loved one died, let them know their feelings are okay, and remind them the death was not their fault.<sup>23</sup> It is also common for children to worry that other people in their life will die. Do not make promises that their other loved ones will not die. Instead, talk with them about how you will take care of yourself and practice safe habits.<sup>24</sup>

It may be challenging for young children to identify how they feel so you may want to model feelings and also describe how our bodies and behaviors show feelings.<sup>25</sup> You can help them get back to their routines and activities, so they can have some stability and a sense of normalcy. They may not understand death, so you may need to remind them gently that their loved one cannot come back.<sup>26</sup> You can talk with the child about how they can keep their loved one in their hearts by remembering the good times and sharing pictures of the child with the loved one when they were young. You'll want to be cautious about what's said in front of children even when you think they are not listening, so they don't overhear frightening or overwhelming information.<sup>27</sup>

For school-aged children, their feelings may come out as negative behavior. If this is the case, be patient and help them process their feelings in healthy ways and find constructive outlets. Help them get back to their routines. Listen to them when they want to talk. If they do not want to talk, let them know it is okay, and you will be there when they feel ready. Be selective about information shared with educators. You do not want negative labels attached to your relative child, but you do want them to be safe and to get the supports they need.

For teens, share your feelings and invite them to do the same when they are ready to talk. Offer to find a counselor if they would rather talk to someone other than you. Help them find ways to practice self-care and relax. Set limits on inappropriate behavior while remaining calm and being patient with them. For serious, risky, or harmful behaviors seek professional help immediately.

**"One thing I know to be true, you can't love away the effects of trauma from neglect and abuse. Our children need the same amount of intensive therapy and services as a traditional foster placement and we, as their caregivers, desperately need the same to help them heal"**

*Jan Wagner, Grandparent Caregiver*

## Further Resources – Trauma

- Generations United Publication, In Loving Arms: The Protective Role of Grandparents and Other Relatives in Raising Children Exposed to Trauma
- National Child Traumatic Stress Network

## Further Resources – Grandfamilies

- grandfactsheets.org
- grandfamilies.org
- gu.org
- www.brookdalefoundation.net/RAPP/rapp.html

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**1** Sampson, D. & Hertlein, K. (2015). The experience of grandparents raising grandchildren. *GrandFamilies: The Contemporary Journal of Research, Practice and Policy*, 2(1), 75-96. Accessed August 10, 2017. Retrieved from: <http://scholarworks.wmich.edu/cgi/viewcontent.cgi?article=1020&context=grandfamilies>.

**2** Grandfamilies or kinship families are families in which children reside with and are being raised by grandparents, other extended family members, and adults with whom they have a close family-like relationship such as godparents and close family friends.

**3** Child Welfare System refers to the network of state and federally supported agencies in the U.S. that focus on ensuring children are in safe, stable, permanent environments that support their well-being. Children and families may be involved in the child welfare system without the children entering foster care.

**4** Stambaugh, L.F., Ringeisen, H., Casanueva, C.C., Tueller, S., Smith, K.E., & Dolan, M. (2013). Adverse childhood experiences in National Survey of Child and Adolescent Well-Being (OPRE Report #2013-26). Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services. Accessed August 10, 2017. Retrieved from: [https://www.acf.hhs.gov/sites/default/files/opre/aces\\_brief\\_final\\_7\\_23\\_13\\_2.pdf](https://www.acf.hhs.gov/sites/default/files/opre/aces_brief_final_7_23_13_2.pdf). | The ACEs study is an ongoing collaboration between Kaiser Permanente and the U.S. Centers for Disease Control and Prevention (CDC). In this description the phrase "general child population" refers to thousands of adult members of Kaiser Permanente who responded to a retrospective survey.

**5** Children Thrive in Grandfamilies. Generations United. Retrieved from: <https://www.gu.org/app/uploads/2018/05/Grandfamilies-FactSheet-ChildrenThriveinGrandfamilies.pdf>.

**6** Trauma. Oxford English Dictionary. Retrieved from: <https://en.oxforddictionaries.com/definition/trauma>.

**7** Trauma. Substance Abuse and Mental Health Services Administration – HRSA Center for Integrated Health Solutions. Retrieved from: <https://www.integration.samhsa.gov/clinical-practice/trauma>.

**8** Understanding Child Trauma. Substance Abuse and Mental Health Services Administration. Retrieved from: <https://www.samhsa.gov/child-trauma/understanding-child-trauma>.

**9** Ibid.

**10** Lander, L., Howsare, J., and Byrne, M. (2013) *The Impact of Substance Use Disorders on Families and Children: From Theory to Practice*. National Institutes of Health Public Access. Retrieved from:

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3725219/pdf/nihms-496858.pdf>.

**11** Annie E Casey Foundation Kids Count Data Center. Analysis of data for 2008-2016 from the Adoption and Foster Care Analysis System (AFCARS), made available through the National Data Archive on Child Abuse and Neglect (NDACAN). | Smith, S. (2018). *Setting the Data Context for FFPSA* [PDF Document]. Casey Family Programs. Retrieved from: [https://www.eiseverywhere.com/file\\_uploads/e7880c3b9f93d25e1798b6759c3867e6\\_GeneralSession-settingthedatacontextforFFPSA\\_5Smith.pdf](https://www.eiseverywhere.com/file_uploads/e7880c3b9f93d25e1798b6759c3867e6_GeneralSession-settingthedatacontextforFFPSA_5Smith.pdf).

**12** Trauma and Violence. Substance Abuse and Mental Health Services Administration. Retrieved from: <https://www.samhsa.gov/trauma-violence>.

**13** Ibid.

**14** Understanding Child Trauma. Substance Abuse and Mental Health Services Administration. Retrieved from: <https://www.samhsa.gov/child-trauma/understanding-child-trauma>.

**15** Ibid.

**16** Ibid.

**17** Ibid.

**18** Ibid.

**19** Ibid.

**20** Ibid.

**21** Traumatic Grief. The National Child Traumatic Stress Network. Retrieved from: <https://www.nctsn.org/what-is-child-trauma/trauma-types/traumatic-grief>.

**22** Traumatic Grief. The National Child Traumatic Stress Network. Retrieved from: <https://www.nctsn.org/what-is-child-trauma/trauma-types/traumatic-grief>.

**23** Helping Young Children with Traumatic Grief: Tips for Caregivers. The National Child Traumatic Stress Network. Retrieved from: <https://www.nctsn.org/resources/helping-young-children-traumatic-grief-tips-caregivers>. | Helping School-Age Children with Traumatic Grief: Tips for Caregivers. The National Child Traumatic Stress Network. Retrieved from:

<https://www.nctsn.org/resources/helping-school-age-children-traumatic-grief-tips-caregivers>. | Helping Teens with Traumatic Grief: Tips for Caregivers. The National Child Traumatic Stress Network. Retrieved from: <https://www.nctsn.org/resources/helping-teens-traumatic-grief-tips-caregivers>.

**24** Ibid.

**25** Ibid.

**26** Ibid.

**27** Ibid.

# GrandParents Raising Grandchildren Support Group

**Confidential conversation and sharing of financial and educational resources with peer caregivers and professional facilitators  
the LAST TUESDAY of the month from  
9 AM to 11 AM at  
Rose City Senior Center  
8 Mahan Drive, Norwich, CT 06360**

## 2022-2023 Schedule

December 27, 2022 | January 31, 2023 | February 28, 2023

March 28, 2023 | April 25, 2023 | May 30, 2023

June 27, 2023 | July 25, 2023

### **Inclement Weather Policy:**

Meetings will be cancelled if public schools or the senior center are closed or delayed.



19 Ohio Avenue, Suite 2  
Norwich, CT 06360  
860-887-3561  
800-690-6998  
[www.SeniorResourcesEC.org](http://www.SeniorResourcesEC.org)



Norwich Youth & Family  
Services  
75 Mohegan Road  
Norwich, CT 06360  
860-823-3782  
[www.NorwichCT.org](http://www.NorwichCT.org)



Rose City  
Senior Center  
8 Mahan Drive  
Norwich, CT 06360  
860-889-5960  
[www.NorwichCT.org](http://www.NorwichCT.org)

# Grandparents Raising Grandchildren Support Groups

## **Senior Resources Agency on Aging**

Sally Huck, Caregiver Program Coordinator  
(860)887-3561 x126  
Rose City Senior Center  
8 Mahan Drive, Norwich  
Last Tuesday of each month, 9:00 a.m.

## **Eastern CT Area – Mansfield**

Janit Romayko (860)569-1978, Call to Register  
Big Y Mansfield, 141 Storrs Road, Mansfield Center  
2<sup>nd</sup> Wednesday of each month, 9:15 a.m.

## **United Services - Kinship Support Group**

Plainfield Area  
Lori Bergstrom, Prevention Services Manager  
(860)412-8665 [lbergstrom@usmhs.org](mailto:lbergstrom@usmhs.org)  
United Services, 303 Putnam Road, Wauregan  
2<sup>nd</sup> Tuesday of each month, 5:00 – 6:30 p.m.

## **East Lyme Youth Services**

Sarah Firmin, MA – Wellness, Prevention, and Mentoring Coordinator  
860-739-5828 ext. 301  
East Lyme Youth Services  
41 Society Road, Niantic, CT 06357  
1<sup>st</sup> Wednesday of each month



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**Account Name: Your first and last name**  
**Invoice Number: Cash for Causes**




**Mail to: 19 Ohio Avenue, Norwich, CT 06360 - or - Contact: Erica (860) 887-3561 x 110**



We hope you find this month's edition of our Caregiver of Children newsletter informative.

Senior Resources currently produces a monthly caregiver of children newsletter. We are looking for feedback on any ideas you may have for future editions.

Please contact Ishma Harris with any ideas/suggestions or if you wish to be removed from our mailing list.

Ishma Harris: [IHarris@seniorresourcesec.org](mailto:IHarris@seniorresourcesec.org) or 860 887-3561 x 102.

To read previous editions of this newsletter please visit:  
[www.SeniorResourcesEC.org/stay-informed/grandparent-newsletter](http://www.SeniorResourcesEC.org/stay-informed/grandparent-newsletter)