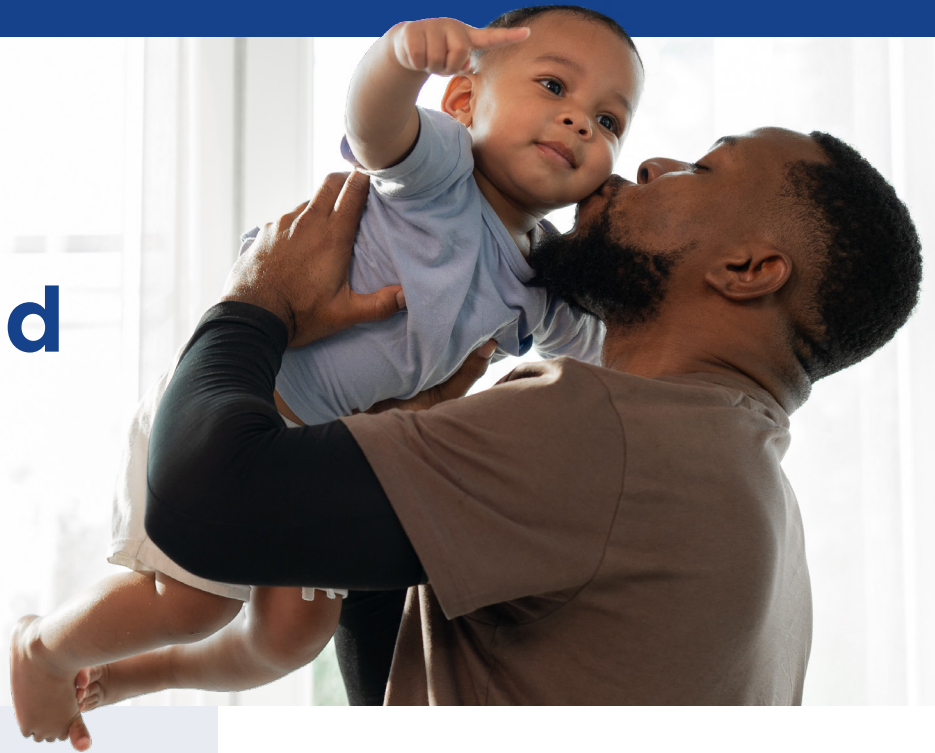


Trauma and parenting



For those who are living with the effects of adverse or traumatic experiences, becoming a parent or caregiver may introduce a variety of new challenges. “For many adult trauma survivors, the capacity to offer warmth and nurturance to...children is not limited,” but the confidence to believe in themselves as “competent caregivers is significantly depleted” (Hong & Park, 2012).

In order to work effectively with parents or caregivers who have experienced any type of trauma, it is important to understand trauma and trauma reactions as well as engagement strategies and opportunities for support.

WHAT IS TRAUMA?

Trauma can be understood by the 3 E's: It is an *event or series of events*, that are *experienced* as physically or emotionally harmful or life threatening, where there are lasting *effects* on a person's mental, physical, social, emotional, or spiritual functioning (Substance Abuse and Mental Health Administration [SAMSHA], 2014).

Trauma can be a one-time event, like a life-threatening medical condition or an isolated assault, a chronic experience, like childhood sexual abuse or interpersonal violence, historic or generational, like racism or persistent poverty, or intersecting where there is exposure to multiple events with long-term impact, such as early childhood abuse and birth trauma.

It is important to understand that trauma effects can be wide-ranging and different for everyone. It is “an emotional response to a distressing event or situation that breaks [a] sense of security” (Mental Health American [MHA], n.d.).

There is no one correct way to react to trauma and it impacts each person differently.

UNDERSTANDING HOW TRAUMA PRESENTS

Trauma can present in different ways for different people and “can be conceptualized as a normal response to an abnormal situation” (SAMSHA, 2014).

It is important that we reframe trauma responses as adaptations and behaviors that people have used in service of survival and safety. This is not an exhaustive list, but it's important to show the many different ways that trauma may show up for people.

	Cognitive	Emotional	Behavioral
<ul style="list-style-type: none"> • Being sensitive to light/noise/touch • Feeling run-down or low energy • Persistent aches and pains • Recoiling to touch • Tensing/freezing/shutting down • Dizziness or persistent headaches • Rapid heart rate/jitters 	<ul style="list-style-type: none"> • Difficulty differentiating who and what situations are safe or dangerous • Trouble focusing or concentrating • Difficulty imagining the future • Loss of trust in self • Hypervigilance, flashbacks, intrusive thoughts 	<ul style="list-style-type: none"> • Nightmares/sleep disturbances • Difficulty trusting others • Feeling helpless • Feeling easily overwhelmed • Anger, irritability • Feeling chronically empty, numb • Persistent feelings of being unsafe 	<ul style="list-style-type: none"> • Fighting • Being resistant to change • Being protective of personal space • Engaging in risky or provocative behaviors • Reverting to younger behaviors • Withdrawal/isolation • Being easily startled or alarmed • Risky or increase substance use

HOW DOES TRAUMA IMPACT PARENTING?

Common Triggers for Parents (Pressley & Wilson, 2022)

Transitioning to being a parent or caregiver can be challenging for many people. These challenges can be especially difficult for trauma survivors and may show up at different ages and stages of childhood development - certain child behaviors may trigger trauma reactions in parents and caregivers.

Common triggers may include:

- Certain child behaviors that remind a parent or caregiver of a person or event
- A child reaches the age that specific trauma experiences happened for the parent or caregiver
- A child reaching a particular age/stage of development, such as puberty
- A child's personality or attributes reminds a parent or caregiver of themselves
- A child reminds a parent or caregiver of an abuser
- Persistent family or environmental stress

WORKING WITH PARENTS WHO HAVE SURVIVED TRAUMA

Below are opportunities to engage and support parents who have survived trauma.

Identify Strengths

Using a strengths-based approach can be a powerful way to engage with all people. Everyone has strengths. Providers can help support parents and caregivers in identifying both their own strengths and their children's. While parenthood often places people in new and unfamiliar situations, there are often other life roles where survivors have displayed competency that providers can help identify and build upon.

For example, a survivor may demonstrate good communication skills at work. Providers can support survivors to recognize and adapt that skill to the home setting. Providers can also notice what a parent is doing well in the moment. It may be challenging for someone to keep appointments or show up to a group. When they do come, notice and acknowledge their presence and ability to be there. By asking parents to name one good thing about their child, survivors may experience a new perspective with their child and the child may benefit from hearing something positive about themselves. Identifying strengths, big and small, is a powerful tool for both engagement and building capacity to parent effectively.

Help Survivors Recognize their Triggers

Learning about individual triggers – those situations that evoke strong feelings or reactions – can help survivors with emotion identification and regulation. These “hot buttons” could be things like particular child behaviors, environmental stressors, or challenging interactions. For many survivors who may already be impacted by lack of sleep from birthing, being woken up unpredictably or in the middle of the night for a feeding can be triggering.

Triggers may be difficult to identify at first but providers can support survivors in recognizing and naming physical, emotional, and behavioral

responses to stress. Identifying these responses allow survivors to a) notice where the response shows up in the body and b) utilize strategies to calm the response so that they may respond versus react. By becoming aware of automatic reactions to stress or distress, survivors more effectively parent. For example, when a survivor feels anxious about something, can they identify if they get combative or if they shut down? If a survivor is sad, where in their body can they feel that sadness? Bringing these responses into awareness allows for brain and body regulation to create moments of conscious response versus automatic reaction.

Build Systems of Support

Issues of isolation and connection impact many trauma survivors. For some, a lack of connection may be the outcome of adversity. For instance, some survivors may not have developed a strong sense of knowing who is safe to trust, while for others' intentional isolation was a part of the trauma they experienced.

The transition to parenthood or caregiving can also feel isolating with so many new decisions to make and not feeling sure if a survivor can trust themselves in unknown territory. Helping survivors build strong systems of support can normalize fears, provide emotional connection, offer a sounding board, or reflect back resilience and strengths.

“For the trauma survivor, having an inner circle of people who are aware of...particular vulnerabilities and triggers can be a lifeline” (Pressley & Wilson, 2022).

Providers can gently support and coach survivors on the importance of support networks, identify individual barriers in developing and maintaining relationships, and model healthy relationships to the survivor.

Support Parents in Building Positive Experiences

Positive childhood experiences (PCEs) help children grow and develop into healthier adults. Positive experiences between parents or caregivers and children include discussing things that matter with their children, participating in activities together or with peers, and knowing children's friends and interests.

Research has shown that promoting positive experiences in the following four areas can buffer against long term health outcomes associated with adverse childhood experiences:

- 1 Relationships within the family and with other children and adults through interpersonal activities.
- 2 Social and civic engagement to develop a sense of belonging and connectedness.
- 3 Safe, equitable, stable environments for living, playing, and learning at home and in school.
- 4 Emotional growth through playing and interacting with peers for self-awareness and self-regulation (Healthy Outcomes from Positive Experiences [HOPE], 2023)



Parents, caregivers, and others can support access to these positive experiences through big and small acts and modeling behavior that promotes positive relationships and experiences.

ADDITIONAL RESOURCES

Experiences of Mothers Who are Child Sexual Abuse Survivors: A Qualitative Exploration

Cavanaugh, C. E., Harper, B., Classen, C. C., Palesh, O., Koopman, C., & Spiegel, D. (2015). Experiences of mothers who are child sexual abuse survivors: A qualitative exploration. *Journal of Child Sexual Abuse, 24*(5), 506-525. <https://doi.org/10.1080/10538712.2015.1042186>

The Mama Bear Effect: Parenting as a Survivor

The Mama Bear Effect. (n.d.). *The Mama Bear effect* [Website]. <https://themamabeareffect.org/>

Positive Childhood Experiences: HOPE National Resource Center

Healthy Outcomes from Positive Experiences. (n.d.). *HOPE National Resource Center* [Website]. <https://positiveexperience.org/>

Birthing Justice

Matthews, M. M. (Director). (2017). *Birthing justice* [Film]. A Women In the Room Productions. <https://www.pbs.org/show/birthing-justice/>

REFERENCES

Healthy Outcomes from Positive Experiences. (2023). *Resources* [Webpage]. <https://positiveexperience.org/resources/>

Hong, Y. R., & Park, J. S. (2012) Impact of attachment, temperament and parenting on human development. *Korean Journal of Pediatrics*, 55(12), 449-454. <https://doi.org/10.3345/kjp.2012.55.12.449>

Mental Health America. (n.d.). *Understanding trauma and PTSD* [Webpage]. <https://www.mhanational.org/understanding-trauma-and-ptsd>

Pressley, J., & Wilson, K. (2022). *Turning the tide: Parenting in the wake of past trauma*. Foundation Trust. <https://www.nctsn.org/sites/default/files/resources/resource-guide/turning-the-tide-parenting-in-the-wake-of-past-trauma.pdf>

Substance Abuse and Mental Health Administration. (2014). *Trauma-informed care in behavioral health services* (Treatment Improvement Protocol (TIP) Series 57). <https://store.samhsa.gov/sites/default/files/d7/priv/sma14-4816.pdf>

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The Maine Resilience Building Network (MRBN) is a statewide public health 501© (3) organization with a network reaching more than 2,400 individuals and organizations across Maine. MRBN is at the forefront of thought leadership and action to bring about awareness and change that addresses the systemic inequities and root causes of poor public health and health-related outcomes linked to adverse childhood experiences.