

## **Resource Guidelines for “Helping a Traumatized Child”**

**(adapted from “The ChildTrauma Academy” by Dr. Bruce Perry)**

New providers are often initially anxious about how to interact with traumatized individuals, especially children, and need your help in getting comfortable. This PDF is a useful review of how to work with such children. Actually, much of the content provides a great tip sheet for working with all clients.

As you guide practitioners in their work with traumatized children, remember that one of the best ways to reduce their anxiety is to focus on their strengths. An important strength for providers is the fact that they have already completed online training and consequently have many tools at their disposal. In addition, these providers have chosen to be helping professionals and sincerely care and want to be helpful.

Because ITP is about integrating, implementing and applying training to practice, tie your support to training already completed.

There are many aspects of working with traumatized children that tie to concepts previously discussed in training. Reminding the provider about the tools he or she already possesses and staying strengths-based with him or her can help overcome anxiety. You might start by asking providers what they learned from their online or event training that might be useful. If they have trouble identifying training concepts that tie to applying the topic to their practice, we’ve provided some ideas below. Also, please keep in mind that you teach by example, so interact with your supervisees as you would wish them to interact with their clients.

Below, are some of the training concepts that match Dr. Bruce Perry’s suggestions for helping traumatized children. These concepts are worth reinforcing and should be easy to weave into supervision.

### **Concepts from the online training course entitled Professionalism:**

- Listen with your ears and your eyes.
- Respect territory: follow the child’s lead both in terms of pace, touch, etc.
- Do not hesitate to cut short any activity or conversation that seems to be increasing the child’s upset (relates directly to following the client’s lead).
- Use language the child can understand while never talking down to the child.
- Maintain appropriate demeanor – if the child is sad, stay quiet and somber; if the child is playful, you can be too.

### **Concepts from the online training course entitled Basics of CBS:**

- Be strengths-focused: examples include, praising the child for talking about difficult things and focusing on some of the skills the child used to survive the tough things.
- Be needs-based: for example letting the child play (using their ears and eyes to learn more about the child) and responding to the child’s request to show you a drawing or for a hug.