

A Family For Every Child Matching Assistance



*"We should not be asking who this child belongs to,
but who belongs to this child."*

Post-Traumatic Stress Disorder

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After a traumatic event it is normal for people to have higher levels of stress. For example, in the weeks following a car accident you may find yourself scared to drive for at first, but this feeling goes away after a few weeks. For people diagnosed with Post-Traumatic Stress Disorder (PTSD) this anxious feeling does not go away following a traumatic event. The "fight or flight" system in an individual diagnosed with PTSD is damaged, causing someone to feel frightened or stressed even if they are no longer in danger.

PTSD is not just a diagnoses for veterans returning from war. Children in foster care are often diagnosed with PTSD due to the traumatic life events they experienced before coming into care. Sexual abuse, physical abuse, and witnessing domestic violence, community violence or murder can all cause PTSD in a child.

Helping Your Child Cope With Stress

When your child becomes stressed, try and employ some of the following techniques (all are three words or less!):

"Notice" out loud -

Talk to your child when you notice something is bothering him/her. Phrase it in a way that shows your child that you are attentive to their feelings, by saying something like "It seems you are still upset about ____". Never use accusatory phrases like "You're still upset about that?" or "What's wrong

PTSD symptoms are present in about 19% of children referred to foster care. A study conducted in 1999 found that 60% of children in foster care who had been sexually abused were diagnosed with PTSD, and 42% of children who were physically abused were diagnosed with PTSD [\[source\]](#). These numbers indicate that PTSD is one of the more common issues children in foster care are diagnosed with, making it a critical issue for foster and adoptive parents to understand.

Signs & Symptoms of PTSD

A child diagnosed with PTSD may exhibit the following symptoms, which are grouped into three categories:

Re-Experiencing Symptoms:

- Flashbacks
- Nightmares
- Frightening thoughts

Avoidance Symptoms:

- Feelings of depression
- Feeling "numb" emotionally
- Avoiding places, events, or objects that serve as a reminder of the event
- Loss of interest in activities that were once enjoyed
- Experiencing difficulty remembering the event

Hyper-arousal Symptoms:

- Being scared or startled easily
- Feeling tense
- Difficulty sleeping
- Angry outbursts

Depending on the child's age, they will experience symptoms of PTSD differently.

this time?". This will only cause your child to keep their feelings to themselves, which will hinder their ability to process their feelings and move forward.

Listen - Ask your child to tell you in their own words what is wrong. Ask open-ended questions, like "And then what happened?". Don't blame or lecture your child, by telling them what they should have done instead; the whole point is to let your child express his/her feelings and concerns.

Comment - Briefly comment on what you think your child may have been feeling at the time, using phrases like "That must have upset you". This shows your child that you understand how they are feeling and that you care. In turn this will make them feel supported.

Use labels - If your child is younger, he/she may not

Children **ages 5 and younger** may regress in their behaviors, returning to behaviors they exhibited during a younger age, like bed wetting. They may also fear being separated from their parents, and will cry, scream and act clingy.

Children **ages 6-11** may experience flashbacks and nightmares. They may have difficulty concentrating in school. Irrational fears, angry outbursts, and irritability are common. Children of this age may also express feelings of being "numb". In addition, physical aches and pains, like stomachaches or other pains in the body with no medical support are commonly reported.

Children **ages 12 and up** tend to experience symptoms the same way an adult will. Flashbacks, avoidance, nightmares, emotional numbing, problems getting along with peers and antisocial behaviors are common. A child of this age may also isolate and withdraw themselves from others, entertain suicidal thoughts, avoid school, and have trouble sleeping.

Treatments for PTSD

There are a number of treatments for PTSD. Talk with your child's caseworker and therapist to determine which treatment will be the best for your child:

Trauma-Focused Cognitive Behavioral Therapy (TF-CBT): In this type of therapy, children are exposed to the traumatic event via discussion with a therapist. Children learn anxiety management techniques, inaccurate trauma-related thoughts are corrected. TF-CBT teaches children they do not have to be afraid of their memories.

Play Therapy: In play therapy, children use games, drawing and other techniques to help process their trauma. This type of therapy is the most beneficial for children who may not have

have the words to accurately describe their feelings. Help them find those words by using them in your conversation with your child.

Brainstorm - Help your child to think of solutions to help solve a specific problem that may be causing them stress.

Move on - After your child is relaxed, move on to a more positive subject, and think of things your child could do that will help put them in a better mood.

Limit stress - Identify key stressors and situations, and think of ways you can reduce or change them.

Be there - Simply being available to your child and letting them know that may be all they need, even if they don't want to talk right away. Instead, initiate a fun activity the two of you can do together, like riding a bike or

the words to verbalize their feelings and memories of the event.

Psychotherapy: Also known as "talk therapy", psychotherapy occurs one-on-one with a therapist, or in a group setting. Treatment usually lasts 6-12 weeks, but can be longer.

Child Welfare Information Gateway has a publication [Selecting and Working With a Therapist Skilled in Adoption](#) that you may find helpful in your search for treatment for your child.

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baking cookies. Between a fun activity and your presence, your child may open up to you about what is wrong.

Practice patience - You can't fix every problem for your child. Instead, give them the tools to solve problems themselves with some help from you.

Additional Information

Child Welfare Information Gateway - [Posttraumatic Stress Disorder \(PTSD\)](#)

Fostering Perspectives - [Trauma and children: An introduction for foster parents](#)

Kids Health - [Helping Kids Cope With Stress](#)

National Institute of Mental Health - [PTSD](#)

NRCPPFC - [Information Packet: Post-Traumatic Stress Disorder and Children in Foster Care](#)

U.S. Department of Veterans Affairs - [PTSD in Children and](#)

[Adolescents](#)

Articles & Resources

[A Home Within](#)

Matches children with licensed volunteer therapists who provide free, weekly therapy

Child Trauma Academy - [Free Online Courses](#)

Fostering Perspectives - [Adopting and Parenting a Child with a History of Trauma](#)
by Joyce Kennedy and Frank Bennett

[National Child Traumatic Stress Network](#)