Treating Chronically Traumatized Children.
Don’t let sleeping dogs lie!

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Sleeping Dogs Method

- Book
- Six tests form
- Not a protocol
- Age differences
- www.amazon.com
- www.ariannestruijk.com

Children

- Chronically traumatized
- PTSD, FASD, RAD, ODD, ADHD, depression,
  self harm and suicidal
- Alcohol and drugs
- Aggressive
- Crossing sexual boundaries–offending
- Bullying
Generalized treatment
- Emotion regulation is not sufficient
- Child is not stable
- Treatment on behaviour
- Skills training
- Protective behaviours
- Child and Adolescent Mental Health
- Medication
- Don’t wake up sleeping dogs

 Guidelines

PTSD practise parameters AACAP (2010)
1) Focus on traumatic memories (CBT or EMDR)
2) When resistant, keep going

Process trauma, not only work on symptoms

Standard trauma–focused treatment

Phased treatment
- Stabilization phase
- Trauma processing phase EMDR or CBT
- Integration phase

Stabilization is difficult
Strong avoidance

- I can’t talk about it
- I don’t want to talk about it
- I forgot everything
- I’m over it
- It didn’t happen
- We don’t dare to ask

Let sleeping dogs lie

- Child is constantly alert
- No trust
- No attachment
- Lonely
- No self soothing capacity
- Chronic stress

Method

- Motivation and psychoeducation
- Stabilization with six tests:
  - Safety
  - Daily life
  - Attachment
  - Emotion regulation
  - Cognitive shift
  - Nutshell
- Trauma processing with EMDR
- Integration
Motivation and psycho-education

- Connecting problems to trauma
- Psycho-education brain, trauma reactions and attachment
- Child is in charge
Test 1 Safety

- Physical safety (SOS, Turnell & Edwards)
- Basic needs: bed, bath and bread
- Emotional support
- Permission for therapy

Test 2 Daily life

- No new problems every day
- Ready for temporary worsening
- Stable placement
- Safe Deposit Box
- Safe place
- Here and Now
- Triggers/ window
- Medication

Test 3: Attachment

- Calm brain attachment figure
  - Psycho-education
  - Parental support
  - Contact biological parents
  - Perspective
  - Attachmentsystem activated.
  - Child uses adult to regulate
Test 4: Emotion Regulation

Can child tolerate emotions during TP?
- Bodily sensations
- Feelings Happy, Sad, Afraid and Angry
- Dissociation
  - Experience and tolerate bodily feelings
  - Experience and tolerate normal feelings without dissociating

Test 5: Cognitive shift

- Children blame themselves
- Don’t blame the hand that feeds you
- Cognitive shift
- Perpetrator takes responsibility
- Victim-parent often also perpetrator
- Other ‘hand to feed’

Negative cognitions

- It can happen again
- I am out of control
  - Anger/ fear
- It is my fault/ I should have...
  - Role reversal
- I am stupid/ a bad child/ I hate myself
  - Depression/ anger
After trauma processing you want them to shift to...

- I am safe now, it stopped
- I am in control now
- It is not my fault, mom/dad should not have done that/taken care of me
- I am a normal/ok person, despite what happened or what I have done

Trauma Healing Story

- Prepare the child to make cognitive shift
- Provide the child with information
- Brief story with pictures (8 pages)
- Possible traumatising events
- Parents views and intentions
- Presented to the child
- With parents/carers/network
When Cynthia was five, dad and mum were still fighting a lot. Dad says he decided to leave because he thought the fighting was not good for Cynthia and it could not be fixed. Mum says that is true. At that time dad was very young and he felt he could not take care of Cynthia well enough, so he left her with mum. In hindsight, dad says he should not have done that. Dad says he did not realise how ill mum was and how difficult that was for Cynthia. Dad says he always thought about Cynthia and wondered how she was doing, but he was scared to contact her because he felt he was wrong. He was very happy to hear from her now.

Mum says she has a lot of bad memories from when she was a child. She tries not to think about them by using drugs. Mum says the memories make her feel depressed and bad about herself, so bad she tried to kill herself. She felt so bad that she could not think about Cynthia at all. Mum says Cynthia tried to make her happy, but it is not children’s job to make mum’s happy, they cannot. Mum’s and dad’s have to make themselves happy or ask other adults to help them, not children. Now mum says she is happy she did not die, because she wants to be there for Cynthia. She has done therapy and does not think about killing herself anymore. She still uses drugs because it is very hard to stop that. Your body just wants to have more and more. Mum says that she wants to try to stop drugs too and then Cynthia can come and live with her.
Overview of memories
- Child stays within window of tolerance
- Clustering

Test 6: Nutshell
- Overview of memories
- Child stays within window of tolerance
- Clustering

- Dad hitting me
- Locking me up
- Stepdad’s, wildly
- Mum angry
- Stabbing from sheep
- Don’t want to talk about it
Trauma processing phase
- EMDR
- 0–18 years
- 0–4 years with attachment figure
- Complex trauma <12 years, 3–5 sessions
- Complex trauma >12 years, 5–8 sessions
- EMDR practitioner

Integration phase
- Family therapy
- Reunification
- Meeting the perpetrator
- Skills training
- Making life story–movie or photo book
- Going back to former houses/ families
Institute Chronically Traumatized Children (ICTC)

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- Sleeping Dogs training 18 October 2017 Auckland
- EMDR Child Training 19–20 October 2017 Auckland
- FIFO treatment clinics