Trauma-Informed Systems Change in Child Welfare:
Legal Leaders at the Forefront

Trauma-Informed Legal Systems:
A New Paradigm for Understanding & Reaching
Children’s Troubling Behavior

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A tale of two Michigan Judges:

Once similar...

now very different
We

❤️

Attorneys!
Power of the Transdisciplinary Model
It’s all the same elephant!
So............

What the heck was Judge Nye talking about???
Let’s talk a bit about the brain!!!

Hint: Dr Bruce Perry will talk much more about the brain later today!
Driving Miss-Behavior
Vehicle-Brain Metaphor

- Accelerator
- Brakes
- Steering
Floorin’ it: 0 to 60 in 4.3 seconds!

Importance of the *accelerator*
Accelerator Components

- Brain Energy / Arousal - Alertness
- Anxiety / Panic
- Anger / Explosiveness
Wake up!!!

Let’s talk about arousal ...
Arousal Genesis / Regulation

Way too wound-up / “wild” (“Tigger - on crack”)  

Too wound-up (Tigger)

Bored / Low energy / Tired & sleepy (Ee-yore)

Total shut-down (via parasympathetics) “Ee-yore on Quaaludes”
The Confusing Picture of Anxiety
Fight-Flight-Freeze in the DHS/JJ system

- Anxiety / Panic as source for reactive anger/aggression

- Anxiety – Attention – Language interplay in DHS / JJ kids / teens / adults with anger & aggression

- False machismo in anxious DHS / JJ kids / teens
Anger / Explosiveness: Critical Link to Aggression

- Many faces of anger
- Anger as coping skill
- Aggression = Anger plus “bad” brakes
So..., let’s talk about the...
The Prefrontal Cortex: The home of Executive Function

Executive Function: The "brakes" of the brain

- Working memory / memory recall
- Focusing (locking, shifting & sustaining)
- Planning / organizing
- Self-monitoring of behavior/action
  - Impulse control
- Regulation
Executive Function: Promotes regulation of:

• Attention / arousal / energy
• Behavior / action
• Mood / emotion / frustration
The Delicate Balance:
Brain control of emotion / behavior

Top-Down "Brakes" (Prefrontal Cortex)

Bottom-Up "Accelerator" (Brainstem / Limbic System)
Don’t Forget About the Steering

- Conscious control of behavior
- Importance of **tight structure** for optimal behavior management
- Willfulness misconceptions
  - It’s not **all** willful!
  - Fading control at the “edge of the cliff”
- Behavioral “curve balls” in homes, schools, detention...
Neurobehavioral “Secret”
Life in the “Comfort Zone”

Optimal Mood / Arousal Regulation =

Optimal Learning, Behavior, Attention, Memory
When development veers off course...
The Brain-Behavior connection: 3 major & intertwined components

- **Genetics / Epigenetics**
  - What you inherit from both parents

- **Intrauterine environment**
  - During pregnancy

- **Extrauterine environment**
  - After pregnancy
Fetal Alcohol Spectrum Disorder: Impact on Brain Structure
Severe brain damage caused by prenatal alcohol exposure

Severe FAS

Normal Brain

5-day old infants

photo: Clarren, 1986
Corpus Callosum

- 100 million neurons (largest structure in brain)!
- Connects the Left & Right brain hemispheres
- Allows the left side to communicate with the right side
- Assists the individual child to calm down during / after “meltdown”
- Is often damaged by prenatal alcohol exposure / FASD / chronic traumatic stress
Corpus Callosum
Corpus callosum abnormalities in FASD

Mattson, et al., 1994; Mattson & Riley, 1995; Riley et al., 1995
Child Traumatic Stress & the Developing Brain
Neglect: The *Worst* Offender

3-Year-Old Children

- Normal
- Extreme Neglect
WMU CTAC
Comprehensive Assessment

- History (caregiver / teacher / “system” input)
- Cognitive screen (K-BIT 2)
- Neurodevelopmental screen
- Neuromotor evaluation
- Pragmatic language evaluation
- Psychosocial interview
- Medical (including FASD assessment)
Case Example: Juvenile Justice

13-year old boy *shoots* mother’s long time living together partner in the head with a hand-gun at close range (6 inches away) 50 miles from CTAC

In detention pending a plea or trial

Defense requests an *assessment* and CTAC recommended by a non-assigned Probate Judge, who had previously been to our trainings and had ordered several some assignments: “You *have* to do this”
Case Example

• Defense attorney when phoning in the referral to CTAC stated:

“We want to know why this kid, who had never been in any trouble, would plan and shoot and kill his mother’s long time live-in partner. We have no idea?”
Assessment Day at CTAC

• (Menacing) Cop I:
  “We have to be in the room. Don’t you realize this kid is a killer.”

  “You are bringing him cookies? Is this a country club?”
Interview with the mother

• Admitted some **domestic violence**. She did leave the partner for a period of almost a year after several years of violence.
• She returned to her partner after he promised to change.
• No recognition of the traumatic impact on her children.
• She did say that Michael did not want her to go back to him.
Strengths

- He was a successful student
- No behavior concerns
- Likeable
- Able to relate to others
- Able to emotionally regulate
Neurodevelopmental Results

- Low-average IQ
- Attention
- Memory
- Visual processing
- Language
- Mixed social communication skills
  - Narrative cohesiveness
  - Narrative informativeness
Psychosocial Interview

• In late 2009, an incident happened between Mr. Smith. Ms. Jones was in her bed and Michael wanted to kiss her good night.
• Mr. Smith told him not to go into the room. When Michael disregarded him and made a move enter the bedroom,
• Mr. Smith grabbed Michael by the neck. When Michael tried to move away, Mr. Smith tightened his grip on Michael’s throat.
• Michael thought that Mr. Smith was going to choke him to death.
Psychosocial Interview

• He explained that his stepfather (Mr. Smith) made him and his little brother sit on the kitchen chairs.

• His step-father would then hit them “real hard” with a paint stirring stick. Michael reiterated that they were hit real hard, everywhere on their bodies including their face.

• Michael admitted that he thought about the paint sticks twenty times a day.
Psychosocial Interview

- Michael then disclosed that his stepfather one time choked him so hard that he almost killed Michael.
- In addition, his stepfather had him up against the stove and Michael thought that his stepfather was going to ignite the burner and burn him.
Psychosocial Interview

• When asked if there were any other incidents involving his stepfather, Michael disclosed that his stepfather “put our family in danger.

• He was selling drugs. That’s why the other people broke in”.

• Michael stated that his brother saw their stepfather cutting some white powder and disclosed that he believed that his mother knew about it.
Michael then described multiple episodes when his stepfather would stick his finger down his mother’s throat so she couldn’t breathe.

One time, when his stepfather moved back in with them, he tried to stick his finger down his mother’s throat, but she called out for Michael and when he entered the room, his stepfather ran
Psychosocial Interview

• He admitted that he felt hopeless and disclosed that Mr. Smith “ripped the phones out” when he was mad.

• Michael added that “There was nothing I could do. I just hoped that mom would be OK”.

• He was fearful that she would die and he had no power to protect her.
Psychosocial Interview

• Michael admitted that he was helpless and desperate and he could not think of a way out of the situation. When asked, Michael stated that he (Mr. Smith) had to be stopped because there was no reason that this had to go on.

• When asked again if there was something in his head that told him that he (Michael) had to stop Mr. Smith, Michael stated, “Not exactly. Someone has to do something or it has to stop happening”.
Psychosocial Interview

• I felt desperate, but mom wasn’t going to do anything”
Psychosocial Interview

• Michael asked if he seemed like a bad kid.

• He stated that others think that he is a bad kid.

• The clinician replied: You are not a bad kid, you were a desperate kid.
Psychosocial Interview

• Michael admitted that he was scared and helpless and desperate, and that he never did anything wrong to him (Mr. Smith).
• He added that he did not want other kids to go through this and he stated that he was sad.
• He stated that he cries almost every night and he wishes that he could go home.
Second Interview with mother

• Mother later acknowledged that at times she was fearful that Mr. Smith would kill either Michael or herself.

• She agreed with Michael that she was fearful for both her own life as well as his.
Now...Judge Nye...
the Good Guy
Part II
Trauma Informed Child Welfare System

Trauma Informed Evidence Supported/Based Service Delivery

Improve Child Outcomes
Trauma Informed Initiative: Results so far...

NACC Annual Conference 2010
Number of Screening Checklists Initiative-wide=767

(Each checklist represents a child age 6 or over)

<table>
<thead>
<tr>
<th>Place</th>
<th>Count</th>
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<tbody>
<tr>
<td>Hillsdale</td>
<td>155</td>
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<tr>
<td>Livingston</td>
<td>144</td>
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<tr>
<td>Mason</td>
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<td>Lake</td>
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<td>Newaygo</td>
<td>109</td>
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<td>Manistee</td>
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Total Number of Students = 687

Behaviors

Exposures

More Behavior Problems

Increased Exposure
Trauma-Informed System Change Instrument 1st year Hillsdale/Livingston

![Bar chart showing differences between agency policy and practice over two years.](image)
One yr review of court files in Hillsdale County

• All open N/A files reviewed for:
  – Presence of Court Report
  – Presence of Therapist Report
  – Addressing trauma in other reports submitted (DHS, MH)

• And so?
  – All files had the Court Report
  – About 1/2 had some elements completed accurately
  – Few had accurate representation of child’s traumatic impact
  – Not integrated
Time for Frank’s big finish!!!
Support and promote **positive** and **stable** relationships in the life of the child.
Maximize the child’s **sense of safety**
Child services should be guided by a comprehensive assessment of the child’s trauma experiences and the impact on behavior and development.
Assist children in reducing overwhelming emotion
Trauma-Informed Child Welfare System
Essential Elements: Lawyer Version

Help children make new meaning of their trauma story and current experience
Trauma-Informed Child Welfare System
Essential Elements: Lawyer Version

Address **impact of trauma** and subsequent changes in the child’s behavior, development, and relationships.
Trauma-Informed Child Welfare System

Essential Elements: Lawyer Version

Provide *support and guidance* to the child’s family / caregivers
Trauma-Informed Child Welfare System

Essential Elements: Lawyer Version

Coordinate services with other agencies
Trauma-Informed Child Welfare System
Essential Elements: Lawyer Version

Manage professional and personal stress
Thank you all for coming!