

Some Difficulties Following Trauma: The impact of complex trauma across different domains

In order to work with these young people it's important to understand these difficulties using a trauma framework: Much of the difficult behaviour of children and young people who have experienced early trauma and disrupted attachments is due to pain and distress. Because these young people have limited control of this we need to understand that, very often, they simply can't behave like other children. We must therefore take care to ensure that we don't assume these young people are simply making bad choices when they are often in fact unable to behave in the manner we'd otherwise expect from them.

When young people endure multiple traumatic events over long periods of time they are especially likely to have multiple gaps in their development. Developmental gaps from earlier in childhood will challenge a youth's ability to complete the developmental tasks of adolescence. It is as if the youth is being asked to climb a stairway with missing steps.

This is not a comprehensive list of some difficulties following trauma but is a good summary:

Attachment / Relationships / Social

- Uncertainty about the reliability and predictability of the world
- Problems with boundaries
- Distrust and suspiciousness
- Social isolation
- Interpersonal difficulties
- Difficulty attuning to other people's emotional states
- Difficulty with perspective taking
- Difficulty enlisting other people as allies
- Compulsion to control environment & people (manipulation)
- Indiscriminate affection
- Demanding or clingy
- Can't have fun
- Independent – don't need others
- Show little guilt or remorse

- Lack compassion & empathy
- Poor peer relationships

For example, Tom is a 16 year old with a developmental trauma history. Tom finds it really hard to trust other people, he often takes advantage of others when he can, he rarely seems to show empathy towards others and does not seem to care when he is faced with harsh consequences for his behaviour.

Biology / Physical

- Sensorimotor developmental problems
- Hypersensitivity to physical contact
- Analgesia
- Problems with coordination, balance, body tone, accident prone
- Difficulties localizing skin contact
- Somatization
- Poor hygiene
- Muscle tension
- Sleep disturbances
- Toileting issues
- Increased medical problems across a wide span, e.g., pelvic pain, asthma, skin problems, autoimmune disorders, pseudo-seizures

For example, Hannah is a 14 year old with a developmental trauma history. Hannah wets her bed almost every night and seems unconcerned about the odour in her bedroom and on her body each morning. Hannah also struggles to get to sleep, she often complains that she feels hot, and requires a fan and or air conditioner on in her bedroom even during the colder months if she is going to get any sleep at all.

Affect Regulation / Emotions

- Difficulty with emotional self-regulation
- Difficulty describing feelings and internal experience
- Problems knowing and describing internal states
- Difficulty communicating wishes and desires
- Difficulty recognising emotions in others
- Poor emotional language
- Intense emotions sometimes without understanding why they have come up

- Feelings that spiral out of control such as fear, dread and shame.
- Often hyper-vigilant, fearful & anxious And / OR Often detached and distant, as if living in a daydream and disconnected from reality, forgetful and hard to reach.

For example, Robert is a 17 year old with a developmental trauma history. Robert typically describes his emotional state as either feeling angry (really angry) or 'OK'. He often presents with explosive episodes of rage and later reports that he does not remember much of what happened or what he did during these episodes.

Behavioural Control

- Poor modulation of impulses
- Self-destructive behaviour
- Aggression against others
- Pathological self-soothing behaviours
- Eating disorders
- Substance abuse
- Excessive compliance
- Oppositional behaviour
- Difficulty understanding and complying with rules
- Communication of traumatic past by re-enactment in day-to-day behaviour or play (sexual, aggressive, etc.)
- Cruel
- Pathological lying
- Increased high-risk and pleasure-seeking behaviour

For example: Sarah is a 12 year old with a developmental trauma history. Sarah seems to do things, often very unsafe or 'silly' things without thinking. Sally is very impressionable and often engages in problematic behaviours when prompted or encouraged to by peers. A lot of work has been done to help Sally learn to problem solve better and think before acting, however Sally seems to keep getting herself into trouble.

Cognition / Thinking

- Difficulties in attention regulation and executive functioning (thinking and reasoning skills)
- Memory problems
- Lack of sustained curiosity
- Problems with processing new and different information
- Problems focusing on and completing tasks

- Difficulty planning and anticipating problems with cause & effect thinking
- Problems understanding own contribution to what happens in different situations
- Learning difficulties
- Delays with language development including understanding what people are saying, and expressing oneself using words.
- Problems with orientation in time and space
- Problems being able to correctly see, hear and understand what is going on in the environment around them.

For example: Tegan is a 15 year old with a developmental trauma history. Tegan has been diagnosed with an Intellectual Impairment. He struggles terribly with school work, especially paper based work (reading, writing, maths etc). When people first meet Tegan they are typically unaware of his underlying cognitive difficulties as they are hidden behind routine social interactions. This causes problems for Tegan when people assume that he is lazy and or defiant when, for instance, he is unable to complete school work or fill out forms.

Self-Concept / View of the World

- Lack of a continuous, predictable sense of self
- Poor sense of separateness from others
- Disturbances of body image
- Low self-esteem
- Self Blame
- Experiencing being labelled by others
- Intense shame and guilt
- Sees self as bad, and often triggers responses from others that further reinforce this negative self view.
- Outside world seen as a unsafe place
- Other people seen as unavailable, neglectful, rejecting, and unresponsive.

For example: Sinead is a 13 year old with a developmental trauma history. Sinead often seems to want to be treated badly, sometimes escalating continually until finally someone 'looses it' and responds aggressively, to which she responds by calming down. Sinead also tends to find it hard to accept praise and positive feedback, sometimes even responding aggressively to such experiences.

Adapted from: Cook, A., Blaustein, M., Spinazzola, J., & van der Kolk, B. (Eds.) (2003). Complex trauma in children and adolescents. National Child Traumatic Stress Network.

<http://www.NCTSN.org>