

childPSYCH News

A newsletter for professionals and parents

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Special points of interest:

At *childpsych* only psychologists who are registered teachers and/or Educational Psychologists will write the report on learning difficulties

All *childpsych* psychologists are trained as specialist psychologists

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The Effects of Abuse on Children

By Annemari de Korte MAPS, staff Psychologist at *childpsych*

Exposure to neglect and ongoing trauma such as emotional or physical abuse and domestic violence can set the young child up for ongoing vulnerability towards stress and can lead to many other negative physical, cognitive and social outcomes for the child. Especially for infants, chronic exposure to trauma has been shown to significantly impact on their neurological and psychological development.



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Early Brain Development and Attachment

From a social perspective, early brain development is promoted by a secure attachment between the primary caretaker and the infant. In a secure attachment relationship, the sharing of positive emotional states between carer and infant is believed to promote brain growth via the activation of specific neuronal connections. In a secure attachment relationship, the caretaker is also able to maintain optimal arousal levels in the infant, which develops its ability to regulate emotions and adapt to stress. Emotional development is further enhanced when the carer has adequate reflective capacity (i.e. is able to think about the child's inner world and needs). The quality of attachment relationships further influences the child's cognitive representations of the self, others and the world (i.e. am I a good enough person, can others be trusted and is the world a safe

place), which further impacts on the child's capacity for intimacy and empathy towards others.

New infant brain research clearly indicates the importance of a secure attachment relationship for the development of the infant's neurobiological functioning, ability to regulate emotional states and adapt to stress.

Trauma and Development

Rapid neurological growth (i.e. creation of synapses – connections and networks in the brain) occurs in the first three years of life. For the rest of the first decade, children's brains have twice as many synapses as adults' brains. Studies have indicated that exposure to chronic and unmediated trauma could impact on the way the young brain develops and organises itself on various levels. Following are some of the possible outcomes - dysregulation of the functioning of the brain's stress system (i.e. the HPA axis), altered cortisol patterns (i.e. stress hormone levels), reduced volume of the hippocampus (affecting memory), reduced volume of the corpus callosum (affecting information processing) and potential effects on mood and impulse

control and emotional regulation. Researchers believe that chronic high levels of cortisol (due to prolonged exposure to stress) could be particularly neurotoxic in that it appears to disrupt myelination (i.e. the formation of myelin sheaths that protect nerves) of structures such as the corpus callosum, which connects the two halves of the brain.

Impact of Stress on Children

Children have a developmental vulnerability to the effects of unmediated trauma. The impact of stress will depend on a range of factors such as the nature and severity of the stress, availability of support from a caring adult, whether the stress is due to a single event or chronic exposure, the child's developmental level, etc. Generally speaking, children are protected against the impact of stress if they have access to a caring adult who acts as a buffer against stress. Also, children appear to suffer less from the impact of stress / trauma when they perceive their parents as coping adequately. The hallmark for trauma is when the primary attachment figure is also the one causing the trauma / stress (e.g. the abusive mother). This can cause an unresolvable conflict for the young child who experiences being stuck with the conflict of either approaching or avoiding the person who is supposed to be their 'secure base'.

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Children's Responses to Trauma

Infants do not have the ability to *verbally remember* trauma, but children of all ages have the ability to process and recall acute traumatic events on some level. Immediate reactions to trauma can include regression (i.e. reverting to behavioural patterns from earlier developmental stage), excessive clinginess, muteness, sleep difficulties, etc. Traumatic re-enactment of stressful events is often visible in young children's behaviour and play (e.g. playing with miniature animals where potentially dangerous animals such as crocodiles, snakes and spiders attack 'defenceless' animals such as bunnies and sheep). In response to a traumatic event, the body's sympathetic nervous system often takes control (i.e. the fight or flight response) characterised by features such as increased heart rate and respiration and raised blood pressure. In young children, a 'freeze or play dead' response to trauma can also occur, where the body's parasympathetic system takes control.

Psychological Treatment of Trauma at *childpsych*

For young children exposed to chronic and ongoing trauma, successful treatment involves long-term therapy (including directive and non-directive play therapy) and progress can be slow. In addition, a highly structured and contained environment with a loving and understanding caregiver is essential for the healing process.

For older children, Trauma-Focused Cognitive Behaviour Therapy has been identified as a "Well Established Treatment" by the Society of Clinical Child & Adolescent Psychology.

This means this approach to treating trauma has been shown to be superior in outcome to other interventions and placebo interventions.

Common Adolescent-Parent Problems

Many problems of adolescence referred to psychologists do not meet the criteria for a psychological disorder. Instead, the majority of problems centre around emotional or behavioural problems such as some anxiety or parent-adolescent conflict. The challenge for psychologists is to attempt to try and determine how much of this is temporary adolescent turmoil, or how much of the problem is the early warning signs of something more severe such as depression.

It is normal for adolescents to test the limits with their parents as this is their way of "breaking" away from their parents and establishing their own individuality. The rebelliousness, mood swings, over importance of the peer group are considered to be the result of the adolescent attempting to form their own self identity. For example, mood swings could occur (aside from hormonal reasons) when the adolescent feels frustrated that their opinions are not being accepted by adults.

To have a healthy separation from their parents and progress toward independence, adolescents need good peer relationships and supportive parents. Adolescents who have a challenging time during this period can become overly dependent on their parents because of a fear of autonomy or they may develop intense interpersonal relationships with their peers. To help the adolescent move toward appropriate independence, parents need to provide a sup-

portive environment. This means that parents need to keep the communication channels open. Good communication involves such things as; listening, problem solving and realistic expectations. This does not mean there will be no conflict! Research has shown that when adolescents *perceive* their parents as hostile and angry, they are more likely to become aggressive

themselves and have behavioural issues outside the home. Of course, over protectiveness can result in an adolescent who lacks confidence. So placing excessive boundaries on an adolescent can also make the transition to adulthood difficult. And finally, having no boundaries can result in many problems.

A good way to involve problem solving in your discussion is to first adequately define the problem. For example, "not being allowed to go out enough". Present your concerns and then have them present their concerns. Then together list all the possible solutions and their consequences. Select the best solution based on the consequences. There will be some negotiation (and of course some things that you will outright deny) but the aim is that you are showing your adolescent you are willing to listen and work it through.

Being a parent is a challenging role. Certainly the biggest factor to consider is to treat your adolescent like a young adult—let them have their say, remain calm, explain your reasons, "solve" the problem together.



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