

## Trauma Informed and Developmentally Sensitive Services for Children: Core Competencies for Effective Practice

(Abridged-to see full document please go to www.multiplyingconnections.org)

### Knowledge

# Core knowledge needed about trauma, trauma informed practice and child development to provide trauma informed, developmentally sensitive services to young children and their families

K1. Identify/describe key signs, symptoms, impact and manifestations of trauma, disrupted attachment, and childhood adversity in children and in adults

K2. Explain how behaviors, including those that appear to be "problems" or symptoms often reflect trauma-related coping skills individuals need to protect themselves and survive

K3. Describe the domains and stages of normal childhood development from infancy through adolescence (brain, social, emotional, cognitive, physical) and how they can be affected by trauma, abuse, adversity and stress

K4. Describe local resources for trauma specific treatment and trauma informed services for children and their families

K5. Define trauma informed and trauma specific care, including knowing the key elements of a trauma informed system and being familiar with evidence based trauma treatment models

K6. Explain the relationship amount trauma, adversity, and disrupted attachment in the child/caregiver relationship

K7. Describe the multi-generational nature of trauma and childhood adversity

K8. Define re-traumatization and identify ways that children and their families can be retraumatized/triggered by the systems and services designed to help them

### Values and Attitudes

## Core values and attitudes needed to provide trauma informed, developmentally sensitive services to young children and their families

V1. Believe that providing trauma-informed/developmentally sensitive care is an appropriate and important role for anyone involved in providing services to children and their families

V2. Recognize that involving clients/parents/caregivers as partners in the process of recovery from trauma and childhood adversity maximizes the potential for healing

V3. Examine personal beliefs about and experiences of trauma and childhood adversity and the impact these have on interactions with clients, colleagues, organizations, and systems

V4. View childhood trauma and adversity as a significant, complex, and often preventable public health problem with broad ranging effects on children and adults but from which, with proper resources and support, people can recover and heal

### Communication

# Communication skills needed to provide effective trauma informed, developmentally sensitive services to young children and their families

C1. Develop an interpersonal style that is direct, willing to change as a result of interactions, reflective, engaging, honest, trustworthy, culturally competent and eliminates the use of labels that pathologize

C2. Communicate and collaborate with children, families, professionals and communities to establish supportive relationships for growth and healing

C3. Accurately perceive, assess, and express emotions and model non-violent ways of communicating those emotions in order to maintain a safe environment for self and others

#### **Practice** Core skills and abilities needed to practice trauma informed care with young children and their families

P1. Facilitate trauma-informed collaborative relationships with children, parents, caregivers and colleagues which include demonstrating care, respect, cultural competence, developmental sensitivity, employing strength based approaches, maximizing safety for all and opportunities for client/caregiver choice and control

P2. Provide trauma-informed screening and assessment including obtaining appropriate client and family histories to determine exposure to trauma/childhood adversity and risk and protective factors associated with trauma/childhood adversity

P3. Demonstrate sensitivity to children's parents/caregivers who often have unaddressed trauma issues that can impact their ability to help their children

P4. Facilitate referrals and access to trauma informed and trauma specific treatment services for children and their families as needed.

P5. Demonstrate ability to teach children and parent/caregivers techniques that help children who have experienced trauma including relaxation, calming, soothing, and grounding themselves and/or their children and strategies for implementing CAPPD (being calm, attuned, predictable, present, and deescalating).

P6. Create environments that are safe, comfortable, and welcoming for all children, families, and staff

P7. Educate parents/caregivers about risk and protective factors associated with trauma/childhood adversity, healthy child development, and assist them with developing tools/strategies to strengthen development

P8. Assist parents/caregivers of children who have been exposed to trauma and childhood adversity to recognize and address their own risk for secondary/vicarious trauma and possible unresolved trauma in their own lives

P9. Educate and support all staff about the need to recognize and address their risk of secondary/vicarious trauma and how they may be negatively affected by exposure to detailed histories of trauma and adversity

### Communities

Competencies in working with communities to reduce risk factors and increase protective factors associated with trauma and childhood adversity

CM1. Educate and inform community residents, leaders, groups, and coalitions about trauma and childhood adversity including its causes and effects on individuals, along with available resources for recovery and healing

#### **Organizations and Systems**

Competencies in organizational management and policy/system change needed to create and sustain a trauma informed and developmentally sensitive service systems for young children and their families

O1. Identify and describe effective models of trauma informed care (e.g. Sanctuary model, Community Connections model)

O2. Introduce changes in organizational procedures, structures, protocols and policies to support trauma informed, developmentally sensitive practices and services

O3. Involve clients, families, communities and other systems/practitioners in the process of becoming a trauma informed organization

O4. Establish environments that support staff and ensure children's health and safety and are customized to meet each child and family's needs, strengths, capabilities and interests

O5. Teach/train professionals at all levels (administration, management, supervisory, direct service, and support) about core elements necessary for trauma-informed practices and organizations

O6. Advocate with local, state and federal policy makers for the development of funding streams and policies that support and foster a trauma-informed service system for children and families