

# Supporting Caregivers through Trauma Narration & Processing

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## Topics for Today

- *Identifying challenges and opportunities for caregiver involvement in healing*
- *Review goals for caregiver role in trauma narration & processing*
- *Approaches & skills to address challenges*
- *Processing caregiver beliefs that interfere with healing process*
- *Practice & Case Examples throughout*

## What challenges do you have involving caregivers in trauma focused treatment?

- ❖ New concerns each week
- ❖ Highly negative towards youth
- ❖ Fearful that trauma-focus will make things worse
- ❖ Attempt to use therapy time for their own processing
- ❖ Highly emotional/reactive (towards youth, perpetrator, systems)
- ❖ Hopeless that therapy can be helpful
- ❖ Overburdened by systems
- ❖ New caregiver in middle of treatment



### Challenges:

- \* Highly emotional/reactive
- \* Fearful trauma-focus will makes things worse
- \* Hopeless that therapy will help

### Approach:

- \* Trauma-informed space for caregivers
- \* Early involvement

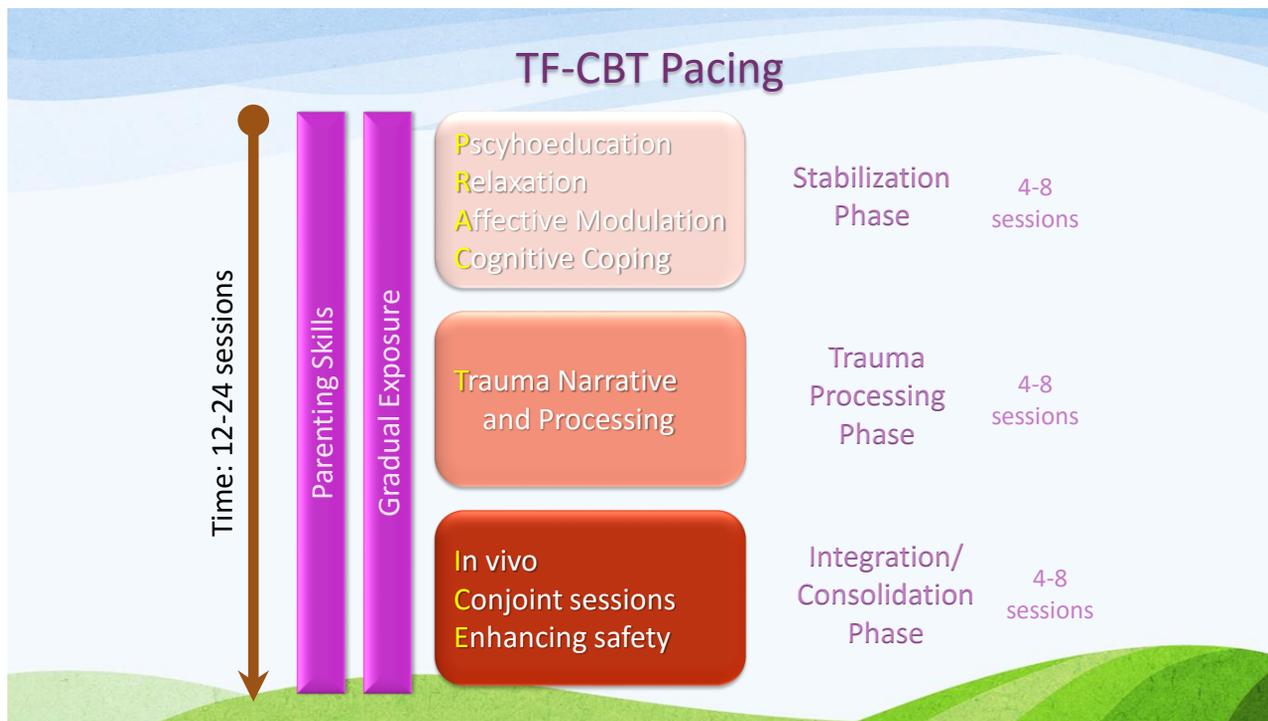
## Creating a trauma-informed process for caregivers

- *Begin with confidence*
- *Establish collaboration*
- *Praise successes*
- *Create sense of safety & control*
- *Be gradual*
- *Make it enjoyable*

*Use similar approaches & strategies to aid caregivers in TF-CBT as with kids.*

## Combined trauma-focused time PRIOR to TN/CP

- *Each & Every session has trauma focus*
  - *If we never cross that bridge, it will always be a scary bridge*
- *Weekly combined caregiver-child time prior to TN provides opportunities to increase comfort & ease of communicating around trauma*



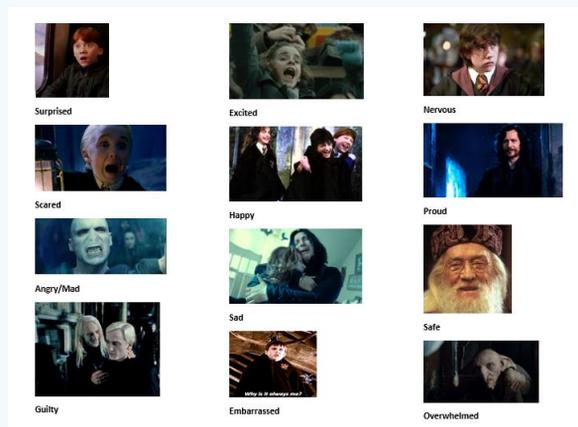
## Abuse Focused Psychoeducation

- ✓ Gradual
- ✓ Fun, Safe, Controlled
- ✓ Enhanced Communication
- Game or Activity therapist moderates
- Early in treatment!

All the Feels	Mom & Me	Family Fighting
Name feelings back and forth for 30 seconds	Tell each other one thing you like about the other.	What is family fighting?
What feelings do kids have when they see family fighting?	Plan something fun to do together this week. Say when and what you will do.	Whose fault is it when grown-ups fight?
Name 2 things you can do when having heavy feelings.	What is something each person is good at?	Why does family fighting happen?

## Affect Modulation

- ✓ Do caregivers stand to learn right along with their children?
- ✓ Building their own feelings vocabulary through supporting their children
- ✓ Starting the groundwork for increasing caregiver's willingness to process their own emotions related to their child's trauma history
- ✓ Adapt to fit the family
- ✓ Fun, engaging

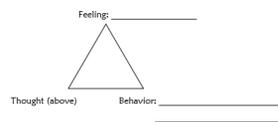


## Cognitive Coping

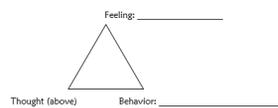
- ✓ Cognitive triangle
  - ✓ Client and caregiver
- ✓ This will often begin cognitive processing for caregivers
  - ✓ How are they communicating to their children about trauma because of their own thoughts?

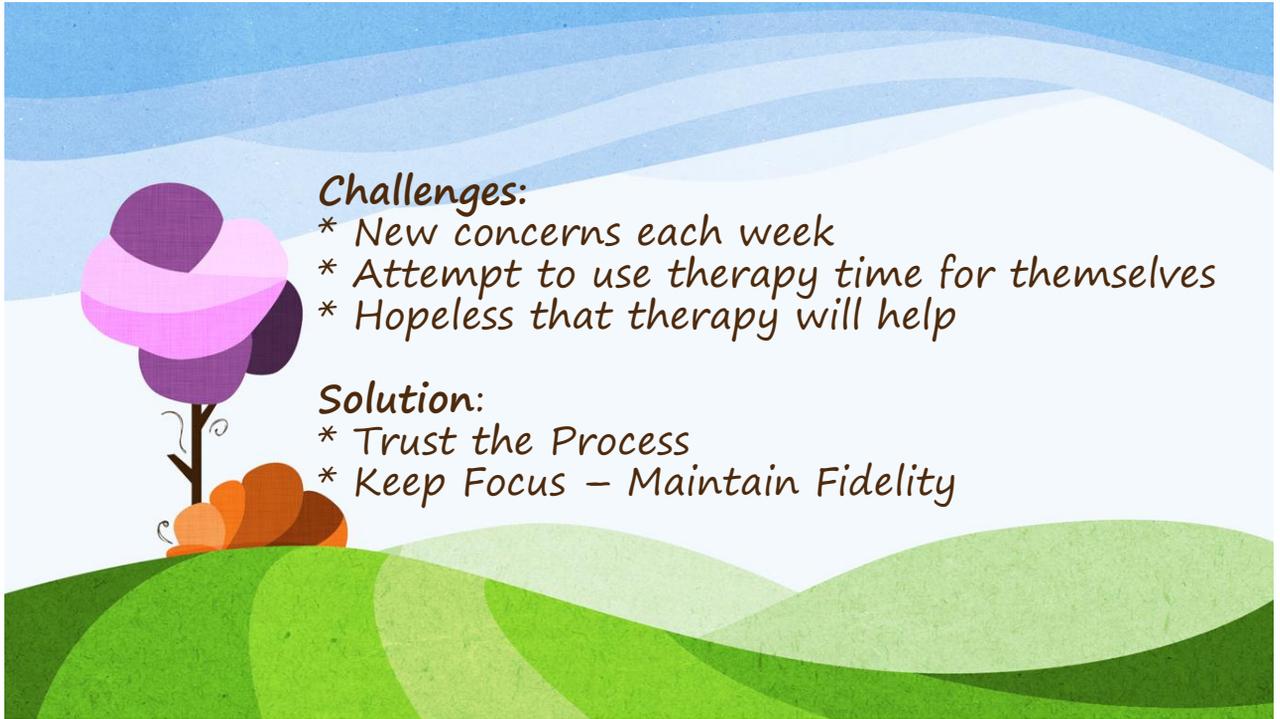
What is a thought you have had about yourself related to your child's trauma?

Original thought: \_\_\_\_\_  
 \_\_\_\_\_



More helpful and balanced thought: \_\_\_\_\_  
 \_\_\_\_\_





**Challenges:**

- \* New concerns each week
- \* Attempt to use therapy time for themselves
- \* Hopeless that therapy will help

**Solution:**

- \* Trust the Process
- \* Keep Focus – Maintain Fidelity

## Maintain Focus on Fidelity

- Some caregivers will have own unmet mental health needs
- Requires reflection on your role and sphere of impact
- Allowing caregiver to repeatedly direct focus away from TF-CBT inhibits the child's opportunity to heal
- Kind and clear establishment of role & redirection of session

## Maintaining Focus Tips

- *Waiting room written check-in*
- *Agenda setting at start of session*
- *Prioritize session time*
- *Validate importance of caregiver concern and identify best way to address (talk to individual therapist; apply skills learned; move forward in treatment)*
- *Openly discuss patterns interfering with child's progress*
- *Referral for individual treatment*



Who, What, When...  
Caregivers Role in TN/CP

## Trauma Narration & Processing Sessions – The Logistics

- Youth – 20/30min & Caregiver 20/30min
- Option to take a week to have a full 1 hour for caregiver
- Gradual exposure for each
- Get child's permission
- Share TN as it develops

## Conjoint Preparation

1. Sharing child's trauma experiences
  - May require gradual exposure
2. Validation of caregiver reactions
  - Process those that interfere with supporting child
3. Maintaining safe, controlled space
  - SUDS ratings check-ins
  - Pause; Re-read; Calming strategies as needed
4. Preparing caregiver to respond in healthy, supportive ways
  - Varies based on need

## Conjoint Preparation Tips

- Give understanding of importance of their role & rationale for next steps
- “This can be difficult AND I know you can do it.”
- Therapist should share child’s process & progress
- Goal for caregivers is simple and powerful... listening & being present for child



### Challenges:

- \* Highly negative towards child
- \* Hopeless that therapy will help
- \* ANY other belief negatively impacting child’s healing

### Solution:

- \* Cognitive Processing with Caregiver



## Cognitive Processing with Caregivers

### Identifying Trauma Impacted Beliefs in Caregivers

#### Safety

*My child will never be safe  
I'm the only person that can keep my child safe*

#### Trust

*I can't trust anyone else around my child  
I can't trust my own child to make decisions because they got themselves into  
this mess*

## Identifying Trauma Impacted Beliefs in Caregivers

### Intimacy

*Because no one is safe, we can't build relationships with anyone*

### Power/Control

*Because they've been through so much I will let them do whatever they want*

*I am to blame for my child's trauma*

### Esteem

*I'm a terrible parent*

## Cognitive Processing with Caregivers

*Caregiver shares concerns or question therapy or expresses belief/behavior that interferes with child's healing*

- ① *Validate and Ask to hear more*
- ② *Seek to understand fully their perspective*
- ③ *Attempt to elicit info for a more balanced, helpful belief*
- ④ *Give information to extent needed*

## *Bringing Caregiver Beliefs Back in Balance*



### *Conjoint TN/CP Sessions*

- *Goal for therapist to “pass the torch” in the child’s healing to the caregiver*
- *Both caregiver & child should know the plan for the session & their role*
- *As needed, therapist should coach caregiver in support of child*
  - *Rather than rescue or intervene*
- *Typical Agenda*
  - *Review plan for day*
  - *Youth shares verbally trauma stories*
  - *Caregiver reads praise letter or verbally shares*
  - *Any additional Q/A or activity*
  - *Celebration of success*



**Challenge:**

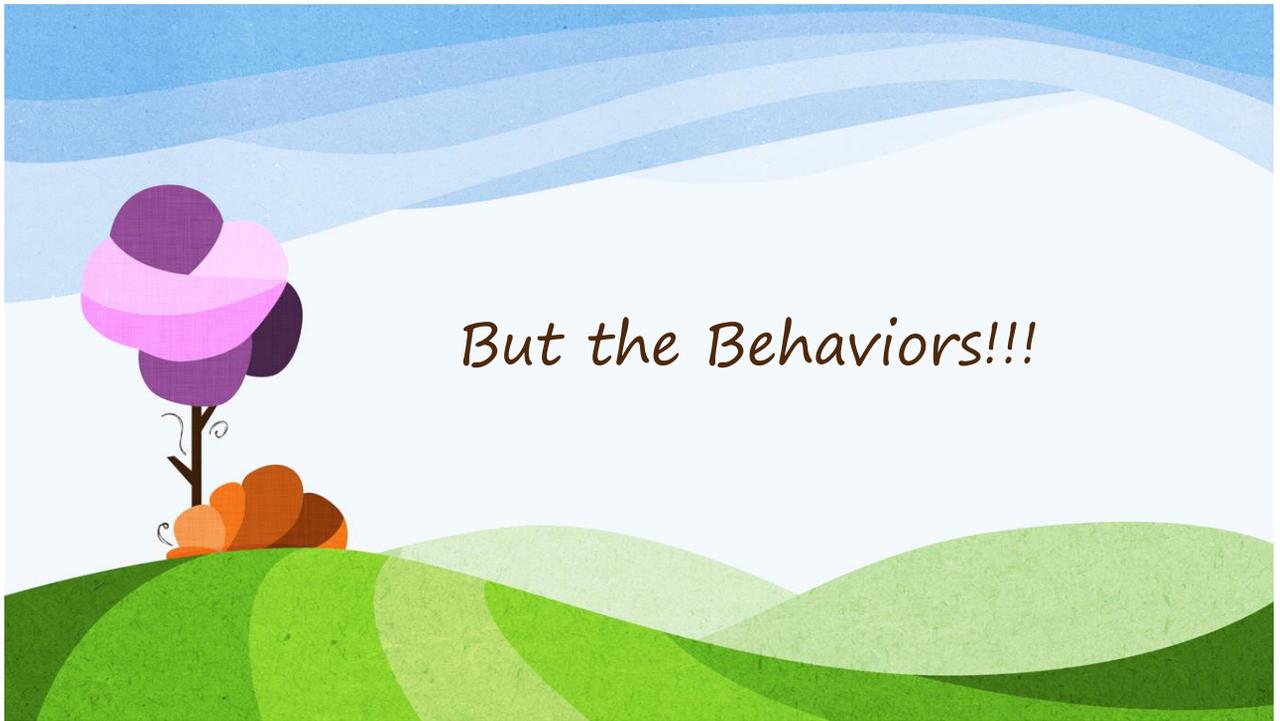
- \* Overburdened by systems
- \* New Caregivers midtreatment

**Solution:**

- \* Communicate across systems
- \* Clinical decision making based on current & future needs

## Clinical Decision Making & Collaboration

- What needs will TF-CBT fill? What will it not?
- Less is More
  - Families benefit more from 1 EBP than a smorgasbord of services
- Talk frequently to caseworkers. Consider a Family Team Meeting.
- Multiple caregivers... Who can fill what role and when?
- Always have an eye towards future
  - Multiple caregivers CAN be involved

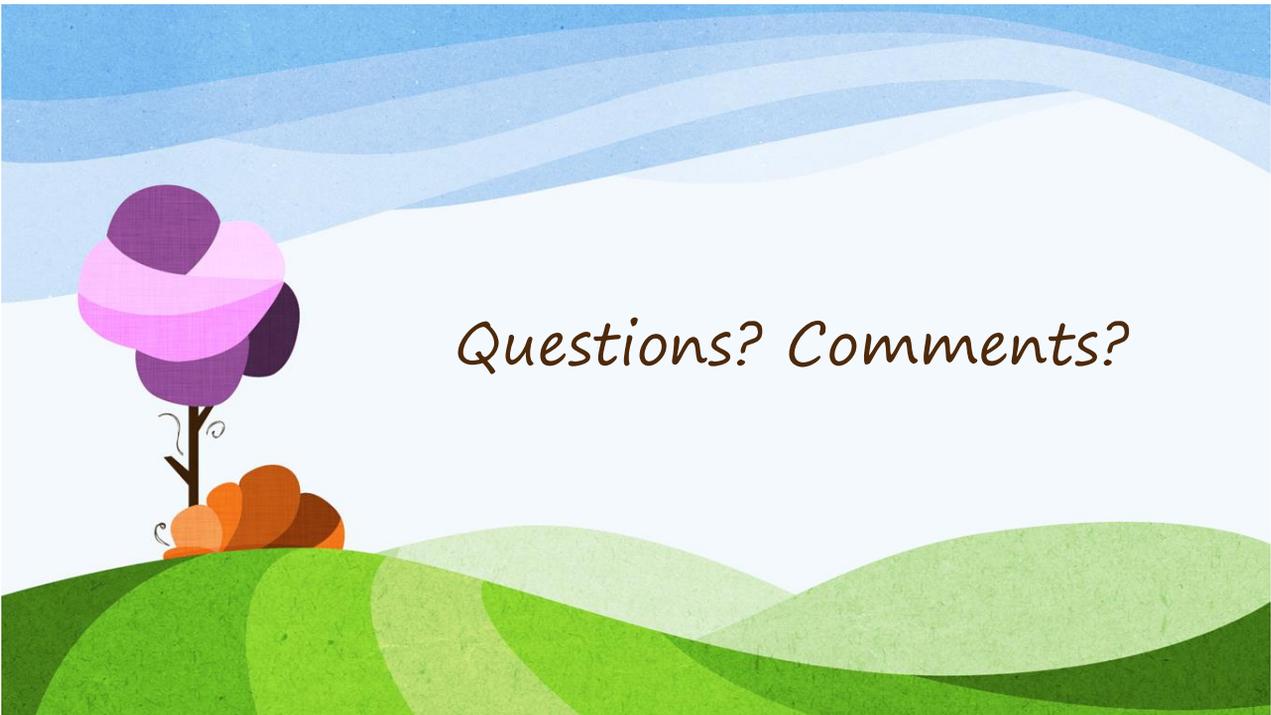


## *Parenting*

- ✓ *Imbued throughout treatment, beginning at assessment*
- ✓ *Consider developmentally appropriate expectations*
- ✓ *Lots of positive reinforcement*
- ✓ *Beginning relationship building*
  - ✓ *Special time*
  - ✓ *Consideration of the importance of relationship as family moves into trauma-focused work*
- ✓ *When and how to implement discipline strategies*

## Problem Behaviors REQUIRE Caregiver Involvement

- Addressing behaviors within TF-CBT
  - Parenting is on-going component
  - Time (& timing) is the issue
- Contract with caregiver to re-evaluate after completion of TF-CBT
- Is primary focus on parent management for disruptive behaviors needed prior to focusing on TF-CBT fully?



Questions? Comments?