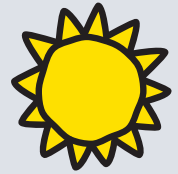


Trauma-Informed Care Tip Sheet

Children and teens with a history of trauma can share similarities in their emotional experience of social interactions and observable behaviors. For instance, they may be more sensitive to others' facial expressions, tone of voice, and body language. Kids may also have extreme behavioral reactions to certain situations or places that are interpreted as distressing or threatening. It's important for parents and providers to consider how their communication style and surroundings can either promote or inhibit the child's emotional regulation and coping. The trauma-informed tips below may help increase well-being during or after a traumatic event.

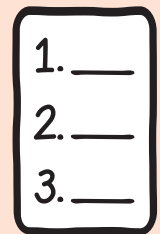
SECURE

- Give reassurance that the child is safe now, physically and emotionally.
- Express that you are available to support them and discuss their current sense of safety i.e., how do they actually feel?
- Provide physical contact with hugs or safe touch (*if appropriate and if child wants safe touch*).
- Make the environment calm and soothing to improve their sensory experience.



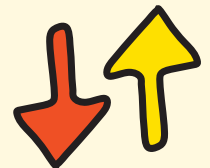
PLAN

- Resume previous routines, rules and activities. If these weren't in place before, make a routine to restore a sense of order and predictability.
- Use visual (*calendars, charts*) and verbal cues for daily tasks (*meal times, bedtimes, homework and appointments*).
- Incorporate consistent one-on-one time into the routine.
- Establish traditions they can look forward to and rely on (*reading a story before bed, craft time, game night*).
- Limit excessive transitions and changes to daily schedules. When disruptions to routine are unavoidable, give notice to help them prepare.
- Make snacks and water readily available, especially for children who didn't always have enough food to eat.



COMMUNICATE

- Create opportunities to discuss their day and how they feel by using open-ended conversation starters (*"What is one thing you learned today?" "How did you feel when _____?"*).
- Be mindful of your communication style (*facial expressions, tone of voice, posture*). Model calmness and warmth.
- Listen attentively by using good eye contact and other nonverbal indicators of active listening (*head nodding*).
- Where appropriate, get down to their level when talking.
- Help them identify and name their emotions. Provide developmentally appropriate information about feelings and ways to cope with them.
[Click here for downloadable Emotions Poster.](#)
- Refrain from making statements of judgement or critique.
- Validate their emotions and experiences to show you respect their feelings (*"It makes sense that you were upset." "That had to be difficult."*).
- Remember, respect is mutual, and how we communicate with our children can impact how they socialize and relate to others.



CONNECT

- Be attuned to the child's biological, sensory and physical needs (*hunger, hydration, fatigue, touch, sounds, light*).
- Consider how their sensory needs and individual temperament/personality can be prioritized and accommodated to promote connection.
- Be accessible and present for the child.
- Show you're listening attentively and are genuinely interested in their needs/ thoughts in order to promote more conversational exchanges over time.
- Help your child foster positive and reliable relationships with members of the community and their peers."



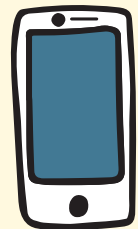
CORRECT

- Shift your focus to look for instances of good behavior. Offer the child positive and specific praise, even for small acts; providing positive feedback can help reinforce their learning of adaptive behavior.
- Before correcting maladaptive behavior, ensure you have established communication and connection with the child.
- Match the consequence to the severity of the behavior at hand. For instance, the caregiver response to a child talking back or a having a tantrum will not be similar to a reaction to violent or dangerous behavior.
- Be empathic and collaborative as you attempt to diffuse oppositional or inappropriate behavior.
- Remember that they are not "bad" for engaging in disruptive behaviors. Instead shift your mindset and acknowledge that they are having a hard time and need your support to cope.
- Use positive and encouraging language that sets boundaries and teaches adaptive skills instead of critical or negative phrasing/commands. For instance, instead of saying "No! Stop jumping right now," try, "We sit on the couch — we do not jump on it."
- After providing supportive feedback, offer an opportunity to rewind and try again, which reinforces a sense of safety and compassion.
- In some situations, the consequences of maladaptive behavior alone will serve as corrective feedback and an opportunity to learn without the caregiver's direct involvement. For example, having a tantrum may result in them being late or unable to go somewhere fun.



PRACTICE

- Model the behavior you would like to see; children are "social learners" and often mimic caregiver responses to daily situations.
- Prepare yourself for strong emotional or behavioral reactions if the child is reminded of the trauma. These responses may be directed at the caregiver or provider, who will benefit from modeling self-regulation and calmness to avoid any re-traumatization.
- Provide education about coping skills verbally, with printed instructions/visual reminders, or electronically (via phone apps).
- Encourage frequent use of coping skills by practicing some together (mindfulness and relaxation activities, deep breathing, etc.)



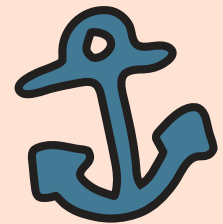
ACTIVITY

- Create opportunities for **“together-time”** and have dedicated one-on-one breaks with the child. Plan to spend 15 to 30 minutes each day with the child during this time, either with one caregiver or as a family. Make it fun and encourage child-selected activities to increase attention and engagement.
- Explore school-based and community programs that provide activities to promote mental wellness and emotion regulation.
- Activities that promote some short-term distraction/reprieve from the traumatic thoughts and feelings may be helpful. **Try reading a story, playing a game or sport, listening to music, spending time with friends or a pet, singing a song, practicing deep breathing, doing yoga, stretching/exercise, practicing mindfulness activities, or going for a walk outside.**
- When children use these coping activities adaptively, consider implementing small rewards or privileges to reinforce the continued use of the skills. Using this type of positive behavior model is also an opportunity to highlight other expressions of their adaptive characteristics such as **politeness, resilience, cooperation, respect and kindness.**



GRACE

- Be willing to try new things and know that these trauma-informed approaches take time, lots of repetition and practice to learn and routinely incorporate, especially in children with traumatic histories who may also experience developmental delays.
- Adjust your expectations to the child’s actual developmental level rather than their chronological age.
- Remember, making significant changes in emotion and behavior may feel like a *marathon, not a sprint*, and that’s OK — the long-term impact is worth the time and continuous effort.
- Keep in mind, the child’s behavior does not define your ability as a caregiver.
- Give yourself and the child grace to learn and make mistakes along the way.



Is more help needed?

If your child’s behavior changed significantly after an exposure to trauma, and is not improving over time, please share your concerns with a professional, such as a psychologist or counselor. It’s important to seek out appropriate treatment and support so the child can develop feelings of safety and trust.

If you need immediate support, call the Wolfson Children’s 24/7 Kids & Teens Helpline at 904.202.7900 or text LIFE to 741741. If there is an immediate safety concern, call 911 or go to the nearest emergency room.