

For Baby's Sake's response to reducing the risk of developmental trauma as a result of increased stress on vulnerable families during the COVID-19 outbreak

COVID-19 is stressful for all families and traumatic for many. In families where the parents are already affected by trauma and the lack of factors that build resilience, COVID-19 could have a long-term impact, potentially including developmental trauma for babies and young children. This note provides context about these risks and offers advice on providing trauma-informed and attachment-focused support to vulnerable families at this time.

In the absence of a close and calming attachment relationship, a young child is at risk of experiencing negative consequences to single or repeated trauma exposure. Without the appropriate amount of support and comfort, the young child may develop multiple, immediate, short and long-term psychological impairments that can last into adulthood. If the child experiences negative consequences from single or repeated exposure to potentially traumatic events without appropriate actions of explanation, support and comfort, then cognitive processes and behavioural responses might lead to learning difficulties, performance problems and problematic behaviour.

Cognitive and emotional processing capacity is not fully developed in young children, so they will experience psychological trauma differently from adults or older children. When negative, psychological consequences of trauma are experienced in early life, the child is susceptible to having severe response to trauma in the future. Additionally, young children coming out of environments where they have suffered trauma may continue to show symptoms of abnormal behaviour or post-traumatic stress even after the event is over and life returns to normal. Be prepared to support parents to understand the following and act accordingly:

- Babies/toddlers can be emotionally overwhelmed when their sense of safety or the safety of their primary caregiver has been threatened or lost
- With the emotional availability and support of the trusted parent/caregiver, they can be equipped with coping strategies that regulate their emotions
- Respond with sincere belief and validation of their child's experience
- Be poised & ready to tolerate their child's response to uncertainty/change of routine/fear
- Manage their own emotions/responses - model containment and never turn away from their child's distress
- Remain mindful that lack of empathy from a parent/caregiver can force a child to act as if nothing has happened, which is unhealthy
- Be honest and explain what COVID-19 is in age appropriate language
- Invite children to ask questions - respond from a position of resilience.

For every child and indeed every parent too, home should be the place where you relax and feel safe - home is your secure base. Right now, with so much demand for self-isolation, professionals can support parents/caregivers to ensure that home remains a safe haven for children. When a home is working at its best as a secure base, it is characterised by qualities of PACE (playfulness, acceptance, curiosity, empathy).

PACE encapsulates an attitude toward one another that cherishes and invites the development of one person without hurting the development of the other. PACE conveys the awareness that there is something special for each of us and no individual is sacrificed for the family and the family is not sacrificed for the individual. The rights of all – parents and children – are valued and respected even at times of traumatic stress.

Where parents/caregivers fail to recognise and validate emotional states and do not stay connected to their child during a traumatic period, when all the routines of normal life are disrupted (and stress overcomes parents/caregivers), this could result in any one of the following:

- Disrupted attachment, an inability to trust, lack of connection, unstable moods and emotional numbness
- Separation anxiety, clinginess and an increase in dependent behaviours
- Dissociative states, disconnected and disorganised behaviours or freezing
- Heightened vigilance, startle responses or increased awareness of everything
- More withdrawn behaviours that show little emotion and decreased attention
- More immature behaviours signalling regression in previously mastered stages of development such as thumb sucking, problems with toileting, bedwetting or soiling
- Lack of developmental progress or not progressing at the same level as peers
- Disturbance in sleeping routines such as difficulty falling or staying asleep, night waking or nightmares
- Loss of language skills or formerly acquired language
- Loss of appetite, unexplained weight loss or failure to thrive
- Increased distress or rapid changes in mood, irritability with more crying
- New fears such as fear of the dark, animals or monsters
- More aggressive behaviours and inability to self-soothe

It should be noted that these symptoms may be indicators of problems other than trauma exposure and that some are frequent in children at some ages or common in response to typical life events such as the birth of a sibling. Nevertheless, infants and toddlers who have experienced trauma may show many of these symptoms.

Resilience – it's ordinary, not extraordinary!

Resilience is the process of adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress such as family and relationship problems, serious health problems or workplace and financial stressors. It means “bouncing back” from difficult experiences.

Resilience is not a trait that people either have or do not have. It involves behaviours, thoughts, feelings and actions that can be learned and developed in anyone. In many senses it is more like a process than a characteristic and we are engineered as human beings to engage in that process when we need to do so. All we need to do is look at the remarkable resilience of individuals and communities to re-build their lives after war, terrorist attacks, natural disaster and personal tragedies.

Factors in Resilience

A combination of factors contributes to resilience. Many studies show that the primary factor in resilience is having caring and supportive relationships within and outside the family. Relationships that create love and trust or provide role models who can offer encouragement and reassurance all help to enhance a person's resilience.

Several additional factors are associated with resilience, including:

- The capacity to make realistic plans and take steps to carry them out
- A positive view of self and confidence in your strengths and abilities
- Skills in communication and problem solving
- The capacity to manage strong feelings and impulses.

With emotionally available parents/caregivers, attuned to their children's needs and the capacity to demonstrate resilience in the face of adversity or reach out for support if needed, all will be well.