CHILDHOOD TRAUMA

CYNTHIA BREWER, D.O.,
BILLINGS CLINIC FAMILY MEDICINE DEPARTMENT
MEDICAL DIRECTOR OF THE CHILD, ADOLESCENT AND ADULT RECOVERY CLINIC AND
MEDICAL DIRECTOR OF THE SANE PROGRAM
BACKGROUND

• A LITTLE ABOUT ME AND HOW I GOT HERE.
• CHILD, ADOLESCENT AND ADULT RECOVERY CLINIC (CARE PROGRAM)
• YELLOWSTONE VALLEY CHILDREN’S ADVOCACY CENTER
  • MULTI-DISCIPLINARY TEAM
• AMERICAN PROFESSIONAL SOCIETY ON THE ABUSE OF CHILDREN
CHILDHOOD TRAUMA

• WHAT IS CHILDHOOD TRAUMA?
• THIS CAN HAVE A LOT OF MEANINGS AND INTERPRETATIONS
• WHAT DOES IT MEAN TO BE TRAUMATIZED?

• APPROXIMATELY 754,000 CHILDREN IN THE US IN 2010 WERE VICTIMS OF CHILD MALTREATMENT
• AN ESTIMATED 1,560 CHILDREN DIE YEARLY FROM ABUSE OR NEGLECT
NEGLECT

• FAILURE TO MEET A CHILD’S BASIC NEEDS
• PHYSICAL
• EMOTIONAL
• MEDICAL
• EDUCATIONAL
PHYSICAL ABUSE

• The use of physical force in a non-accidental manner to cause injury
• Bruises, burns
• Abrasions
• Scars
• Fractures
• Abusive head trauma
SEXUAL ABUSE

- FORCING A CHILD TO ENGAGE IN SEX ACTS
- OFTEN HAS DELAYED DISCLOSURES
CHILD TORTURE

• EXTREME ABUSE THAT GOES BEYOND TYPICAL PHYSICAL ABUSE INJURIES
• INTENTIONAL INFLICTION OF PAIN AND SUFFERING
• WITH-HOLDING OF ESSENTIAL ITEMS INCLUDING SHELTER, WARMTH, CLOTHING
• DOMINANCE/SUBMISSION
• EMOTIONAL ABUSE AND CRUELTY
ACE STUDY

• KAISER STUDY, STARTED IN 1995 TO EVALUATE ADULT OBESITY
• PARTICULARLY TRAUMATIC EVENTS THAT OCCUR IN CHILDHOOD
  • EXPERIENCING VIOLENCE, ABUSE OR NEGLECT
  • WITNESSING VIOLENCE IN THE HOME
  • FAMILY MEMBER DEATH BY SUICIDE
• ENVIRONMENTAL EXPOSURES
  • SUBSTANCE ABUSE
  • MENTAL HEALTH
  • PARENTAL SEPARATION
WHAT IS OUR APPROACH?

- CPS
- LAW ENFORCEMENT
- MEDICAL
- MENTAL HEALTH
- VICTIM CENTERED, TEAM APPROACH
CPS AND LAW ENFORCEMENT

• EACH AGENCY WILL INVESTIGATE WITH A DIFFERENT FOCUS
  • CPS
  • LAW ENFORCEMENT
• THESE AGENCIES CROSS-REPORT BUT CAN CLOSE THEIR CASES INDEPENDENTLY
MEDICAL

• MEDICAL EXAMS DEPEND UPON EXTENT OF TRAUMA

• FOR PHYSICAL ABUSE, SOME PATIENTS MAY SEE THEIR PEDIATRICIAN. FOR MORE SEVERE CASE, REFERRALS ARE PLACED TO PROGRAMS SUCH AS THE CARE PROGRAM

• FOR SEXUAL ABUSE:
  • <120 HOURS: REFERRED IMMEDIATELY TO THE EMERGENCY DEPARTMENT
  • >120 HOURS: REFERRED TO CHILD ABUSE PROVIDER SUCH AS OUR CARE PROGRAM

• NEGLECT CASES ALSO DEPEND UPON THE EXTENT OF THE NEGLECT
MEDICAL EXAMS

• WE PREFER THAT A FORENSIC INTERVIEW HAS BEEN PERFORMED

• IF NO FORENSIC INTERVIEW, PROVIDER SHOULD BE TRAINED IN FORENSIC INTERVIEWING SO THAT THE MEDICAL INTERVIEW DOES NOT CONFLICT WITH LAW ENFORCEMENT OR CPS INVESTIGATIONS

• MEDICAL EXAMINATIONS ARE PERFORMED IN A VICTIM CENTERED ENVIRONMENT, QUIET, WELL-LIT

• PARENTS/GUARDIANS ARE INTERVIEWED FIRST, THEN CHILD

• EXAMINATIONS ARE PERFORMED WITH PARENT OR NURSE PRESENT

• IN THE ER WE HAVE VICTIM ADVOCATES
MENTAL HEALTH

• TRAUMA FOCUSED COUNSELING
• COGNITIVE BEHAVIORAL THERAPY
• EYE MOVEMENT DESENSITIZATION AND REPROCESSING
• ALL TRAINING IS NOT NECESSARILY THE SAME
  • CERTIFICATION VS CERTIFICATE
  • HOW TO DETERMINE THE BEST THERAPISTS FOR THESE VICTIMS IN OUR COMMUNITY
GROUP DISCUSSION

• WHAT COMMUNITY SUPPORT IS THERE FOR THESE CHILD VICTIMS?
• WHAT SUPPORT/TRAINING CAN WE PROVIDE FOR PARENTS?
• HOW DO WE HELP THESE CHILDREN WITH RESILIENCY?
CASE 1:

- 5 CHILDREN WERE EVALUATED AFTER DISCLOSURE OF CHILD SEXUAL ABUSE FROM THE ELDEST DAUGHTER
- THE FAMILY HAD BEEN LIVING OFF-GRID
- THE PARENTS BELIEVED THAT THEY WERE “WICCAN” AND THEY PRACTICED THEIR OWN FANTASY RELIGION THAT MADE THEIR CHILDREN SUBMISSIVE TO THEM.
- THE FATHER SEXUALLY ABUSED ALL 3 DAUGHTERS. HE TOLD THEM THAT IN ORDER FOR HIM TO HAVE MORE ”POWER”, HE HAD TO HAVE SEX WITH HIS CHILDREN
CASE 1:

- IN ADDITION TO MULTIPLE REPEATED COUNTS OF CHILD SEXUAL ABUSE, THE CHILDREN WERE FOUND TO BE SEVERELY NEGLECTED AND ABUSED IN OTHER WAYS
- NONE OF THE CHILDREN COULD READ OR WRITE (AGES 7-14)
- POOR DENTAL CARE WITH MULTIPLE CAVITIES
- SPEECH AND LANGUAGE DELAYS
- STRANGULATION
- SLEEPING ON THE FLOOR, FLEAS
- MEDICATED WHEN ACTING OUT OR BEFORE BEDTIME
- FOOD DEPRIVATION, CHILDREN WERE EATING CONDIMENTS FOR MEALS
CASE 1:

• ALL CHILDREN HAD FORENSIC INTERVIEWS
• SECOND OLDEST WAS HOSPITALIZED BRIEFLY ON OUR INPATIENT PSYCHIATRIC UNIT
• ALL CHILDREN HAD MEDICAL EXAMS, NEUROPSYCHIATRIC EVALUATIONS
• SPEECH ASSESSMENTS AND EDUCATIONAL ASSESSMENTS WERE PERFORMED
• INTENSE COUNSELING
CASE 1:

- FATHER PLED GUILTY TO 3 CHARGES OF SEXUAL ABUSE OF MINOR
- SENTENCED TO 100 YEARS IN PRISON
- MOTHER’S PARENTAL RIGHTS WERE TAKEN
- ALL CHILDREN HAVE BEEN ADOPTED INTO DIFFERENT FOSTER HOMES
- THEY INITIALLY STRUGGLED IN SCHOOL, ADAPTING AND TRANSITIONING
- SEVERAL HAVE CHANGED THEIR NAMES
MISSED OPPORTUNITIES FOR INTERVENTIONS

- WELL CHILD APPOINTMENTS
- CHILDREN WERE SEEING A COUNSELOR DURING ABUSE
- SCHOOL VS HOME SCHOOL
- COMMUNITY/NEIGHBORS
REFERENCES

• THE EVALUATION OF SUSPECTED CHILD PHYSICAL ABUSE. PEDIATRICS APRIL 2015

• CHILD MALTREATMENT: SCREENING AND ANTICIPATORY GUIDANCE. JOURNAL OF PEDIATRIC HEALTH 2013

• THE APSAC HANDBOOK ON CHILD MALTREATMENT, 4TH EDITION. KLIKA AND CONTE 2018