feature

Advocating for Your Traumatized Foster Child at School

BY JULIE BEEM, MBA, AND MELISSA SADIN, MAT, M.ED.

The recent longitudinal research by the Institute for Family Studies shows that children who are adopted are more inclined to behavioral problems and poor reading and math skills as kindergarteners than their peers. By eighth grade, 50 percent of adopted children will be diagnosed with a disability, and 33 percent of them will be suspended (compared with around 12 percent of their peers). Genetics and maternal exposures have both been hypothesized, but, as many researchers have concluded, it's more likely that the environmental factors that made these children available for adoption — abuse, neglect, domestic violence, abandonment, multiple placements — have caused childhood trauma that impacts children's social, emotional and academic abilities. The National Child Traumatic Stress Network points out that one out of four children in all public school classrooms, regardless of poverty, race or other factors, have been exposed to trauma significant enough to impact their ability to learn. For children in foster care and those available for adoption, this number is significantly higher — as high as 80 percent in some studies.

Those of us parenting foster or adopted children recognize that our children have some unique challenges at school, even if we don't clearly understand why. In addition to parenting traumatized children, we must advocate for what they need in school, to an educational system that does not yet recognize the need for trauma-sensitive schools.

How Do Our Children's Early Beginnings Impact Their Learning?

Understanding the impact of trauma, and being able to communicate this to school personnel, is key. Here's a simple crash course: Developing brains grow from the inside out; from the bottom to the top. At birth, a child is not capable of critical thinking because that thinking is done in the frontal cortex, which isn't "online" until the child is much older. We almost instinctively know this because we don't try to teach 6-month-olds to read or 2-year-olds to do calculus. But, we don't always recognize that emotional and social skills develop in this same sequence. It is the reason that a tantruming toddler cannot be coached out of their meltdown with logical reasoning.

Early childhood trauma harms this typical development at a lower level of the brain than when traumatic events impact us as adults. When something traumatic happens as adults we demonstrate resiliency. Resiliency is developed by our earliest healthy relationships (attachment) and reinforced by our ability to make sense out of our lives. Child developmental professionals call that "a cohesive narrative" — being able to tell the story of your own life in a way that makes sense. Adults (and children) who had safe, healthy attachment relationships with their primary caregivers and had adults who listened to them and reflected back their stories in a way that helped them to make sense, grew stronger knowing that they mattered and could impact the world by their actions.

The other developmental piece involved is language. As adults we can't really remember what it was like to have experiences and memories without language to describe them, but when maltreatment happens before they've acquired language, our traumatized children experience this as sensations and feelings.

Now, think about the children you are parenting. You are not their original caregiver, so they have suffered a loss. Each loss, abandonment or other early trauma takes its toll on the development of attachment and brain

development. For some children this is less devastating than for others (often because other adults stepped in as caregivers — grandparents, a neighbor, etc.) The structures in our brains, just like other parts of our body, get stronger the more we use them. The parts we don't use get weaker. The part of our brains we use when faced with a traumatic experience is called the limbic system — and pieces of that system are fully functioning at birth — the pieces that cause us to respond to danger with a fight-flight-freeze response. This evolution was necessary to prevent us from being eaten by a bear. For infants and small children raised in abusive or neglectful environments, the fear-activated structures of their limbic system grow big and strong. When we wonder why our traumatized child "overreacts" to small disappointments or "shuts down" when we correct them, it's because of the feelings of fear and/or shame that activate the well-used "overgrown" limbic system of their early childhood.

The inverse is true, especially for children who have experienced any neglect or had in-utero exposures to toxins such as alcohol, nicotine or illegal drugs. Children develop typically by having the opportunity to build a healthy attachment, and experience the world with their senses and by moving around — creeping, crawling, exploring. Children left alone in cribs for long periods of time, with little human contact or inconsistent care have parts of their brains that don't develop as fully as typical children. Sensory problems, language delays, visual and auditory processing problems, and attention deficits (all of which can be caused by other things as well) have been shown to be the by-product of neglect.

Knowing My Foster Child has been Traumatized, What Should I Advocate for at School?

Helping your child's teachers understand how his brain has developed differently is an important first step. It leads to the understanding that his behaviors, responses and struggles are a "can't" and not a "won't." It also helps to introduce the strategies and tools that often help traumatized children in the classroom — strategies to help them get regulated, feel safe and be connected. Brains triggered by trauma are not ready to learn. So the basic strategy when teaching traumatized children is to focus on making the environment feel safe and giving the child a lot of tools, supports and chances to practice getting regulated when they start to feel those big feelings. As the parent, you can tell the school what you know works at home, but creative teachers quickly figure out that calming and connecting activities are good strategies for the whole class.

If you suspect that your child is struggling with attention deficits, executive functioning delay, language problems, processing disorders or sensory impairments, then the key to getting the school to address these challenges lies in evaluations and data. Be polite, but persistent, in requesting comprehensive evaluations in any areas you suspect your child struggles. An important advocacy tip is to always communicate with the school in writing; if it's not written down, it didn't happen. Requests for evaluations need to be made in writing. Follow up any conversations with teachers or others with a quick summary email. This is good practice for keeping a record of everything that happens at school.

Does My Child Need Special Education/an Individualized Education Plan?

That depends on several things, but note how your child responds to the programs or strategies the school puts in place. There's no eligibility classification under IDEA (special education law) that is specific to childhood trauma. However, children needing a high level of support and services will qualify (through evaluations) and can have any number of eligibilities, including emotional disturbance, other health impairments, specific learning disability, speech and language impairments or autism.

If your child qualifies for an IEP, it's important to be an active part of the IEP team. As a foster parent, if the school doesn't know to include you, ask. If your child has a CASA (court-appointed special advocate), or a law guardian, be sure to include them in the IEP process. They can be powerful advocates for your child's success. Getting to know the classroom teacher(s), the school counselor and the school social worker are important.

It's impossible to give specific advocacy advice in a short article. This is because each child and situation is different — and an individual plan is needed. In addition, each school, district and state has their own way of doing things. Read your state's educational code to understand how the overall system operates. Talk with other local parents and/or work with a local advocate who understands how your local district operates.

ABOUT THE AUTHOR: Julie Beem, MBA, is the executive director of the Attachment and Trauma Network and parent of a high school graduate whose trauma significantly impacted her school career. Beem has written numerous articles, book chapters and given presentations about educating traumatized children. Beem trained as a special education advocate and provides support to parents nationwide, while advocating for trauma-sensitive schools.

Melissa Sadin, MAT, M.Ed., is a lifelong educator and parent of an adopted child. She has served as a special education teacher and an elementary school building administrator for many years. She is on the school board in her town and an active board member of the Attachment and Trauma Network. She is a published author and has produced numerous webinars on educating traumatized children. She also works as an education consultant and provides professional development to parents, schools and municipal service providers.