Judges and attorneys who work in the child welfare system are well aware that many of the children in the system have experienced trauma; less well recognized is that the birth parents of these children often have their own histories of childhood and adult trauma. For example, research indicates that 30-60% of maltreated children have caretakers who have experienced domestic violence themselves. Past or present experiences of trauma can affect a parent’s confidence and ability to keep children safe, work effectively with child welfare staff, and respond to the requirements of the courts. Fortunately, trauma-informed services are increasingly available for both parents and children who need them. Trauma-informed services include mental health services offered by trained professionals that address specific reactions to traumatic events. By recognizing the potential impact of trauma on parenting, judges and attorneys can more easily connect parents with those services.

What are signs that trauma may be present?

Posttraumatic reactions can result whenever children or adults are exposed to threatening events that overwhelm their ability to cope. Posttraumatic reactions may include the following:

- Avoidance (especially of things that remind the person of the traumatic event)
- Feeling emotionally numb or disengaged
- Hyperarousal or emotional or behavioral agitation
- Re-experiencing (e.g., nightmares, intrusive memories, responding to reminders)
- Feelings of powerlessness and helplessness
- Feelings of hyper-vigilance (e.g. watchfulness, alertness, edginess, sleeplessness)

1 In this fact sheet, trauma refers to events outside the typical range of human experience—that is, events involving actual or threatened risk to the life or physical integrity of individuals or someone close to them. Traumatic experiences may include, for example: unexpected death of a loved one, abuse and neglect, serious accidents, experiencing or witnessing interpersonal violence, house fires, combat injuries, natural disasters, acts of terrorism, and community violence. Trauma treatment refers to the mental health services that address behavioral responses to trauma.

In the child welfare system, legal professionals may observe parents who exhibit these posttraumatic reactions in court or when interacting with their children or case managers. It is not uncommon for the court setting or legal process to trigger feelings of helplessness or loss of control in parents, which may be exacerbated by the parents’ past trauma and its reminders. A referral to determine whether post-traumatic stress is present may be appropriate.

**How Can Trauma Affect Parents?**

Trauma does not affect every parent in the same way, and not all parents will develop posttraumatic reactions after a traumatic event. However, trauma can influence parenting in ways that initially may not be obvious. For example, trauma reminders and recurrent posttraumatic reactions may interfere with parents’ abilities to:

- React to a child’s behavior in a calm and thoughtful manner, rather than responding impulsively
- Make appropriate safety judgments, resulting either in overprotection or an inability to recognize dangerous situations
- Meet their children’s emotional needs or support their children’s counseling
- Form trusting relationships with their children and with court personnel and service providers
- Moderate or control their emotions
- Make decisions or plan for the future
- Manage other stresses, such as poverty, racism, substance abuse, and lack of social support

**Can trauma also affect judges and attorneys who work in family court?**

For judges and attorneys working with child welfare cases, secondary or vicarious traumatic stress (also called compassion fatigue) may be a professional risk. This may occur following extensive exposure to the retelling of trauma experiences in court. It is important to keep in mind that, while effective trauma treatments are now more available for parents and children, they also are available for professionals working on a daily basis with difficult cases involving traumatic events.

**How can attorneys and judges use a trauma-informed approach when working with birth parents?**

Judges and attorneys can effectively advocate for the welfare of the child and family by identifying the service needs of parents suffering from the effects of trauma. It is important to: carefully observe parents’ behavior, ask them what they want and need, listen closely to their responses, and ensure a sufficiently safe legal and emotional environment for them to disclose their own trauma history. Once the legal professional identifies the need for a trauma assessment and/or treatment, he or she should consider the following suggestions to effectively link the parent with appropriate services:

- Empower parents by asking what services they think might be helpful, recognizing that they may not know.

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4 Focus groups conducted by NCTSN at national judges meetings in 2005 and 2007 indicated that judges can feel overwhelmed by the prevalence of trauma in the courtroom, the magnitude of the needs of the children and families, and the lack of resources.

5 For a state-by-state listing of free or low cost counseling referrals for legal professionals, see the American Bar Association Legal Assistance Program directory at [http://apps.americanbar.org/legalservices/colap/lapdirectory.html](http://apps.americanbar.org/legalservices/colap/lapdirectory.html)
Identify any mental health services, especially trauma-informed services, the parent has already received, and how the parent responded. If a parent already has a supportive relationship with a mental health provider experienced in addressing trauma, then attorneys and judges can encourage and support this ongoing relationship.

Ensure that there has been a trauma-informed assessment of the parent and the parent’s relationship with each child. Do not assume that a general mental health evaluation includes a trauma assessment or that a traditional parenting program will work with a parent who has experienced trauma. In fact, generic interventions—such as parenting classes, anger management classes, counseling, or substance abuse groups that do not take into account parents’ underlying trauma issues—may not be effective. An appropriate trauma-informed assessment would include the following information:

- The parent’s past or current traumas that may impact his or her current functioning
- The parent’s strengths in coping and problem-solving, and social supports
- Self-report measures and clinical interviews assessing the parent’s mental health status;
- Observations of parent-child interaction
- The presence or absence of posttraumatic reactions
- Recommendations for treatment and additional assessment for trauma and non-trauma related services

Work with local professionals to create a list of evidence-based treatment practices available for parents in your community or region. When trauma-focused treatment services are scarce or non-existent, judges should convene a multidisciplinary team to enhance services or training of clinicians in the community. In rural communities where resources are especially scarce, legal professionals might consider regional approaches or distance learning.

Familiarize the court with the process and scope of evidence-based trauma treatment for adults, including the range of treatments available.6

Watch for the co-occurrence of posttraumatic stress disorder (PTSD) and substance abuse, which is especially common among women. Substance use may be viewed as “self medication” to cope with the overwhelming emotional pain of trauma; but research shows that posttraumatic symptoms can trigger substance use, which, in turn, can heighten trauma symptoms.7 When developing a case plan for parents, assessing for both substance abuse and trauma can ensure that the two problems are treated in an integrated manner, rather than sequentially.

Keep in mind that parents who are adolescents or new immigrants, or have experienced adversities including disability, poverty, or homelessness, may be at higher risk for experiencing trauma; they also may have more barriers in accessing resources.

Let parents know that you understand the significance of their past trauma, while still holding them accountable for the abuse and/or neglect that led to involvement in the system. For many parents, understanding that there is a connection between traumatic events that have happened to them and their present reactions and behavior can empower and motivate them to make positive changes.


Remember that the court experience itself can be confusing, intimidating, disempowering, and, at times, re-traumatizing to parents. When reminders cause some parents to seem numb or disengaged, let them know that attorneys and judges are there to guide them and want to preserve, strengthen, and support them and their family.

Build on parents’ strengths and their desires to be effective.

By working together, judges, attorneys, case managers, and parents can give children in the child welfare system the care and support they need. This will be achieved more easily if parents’ needs, including the need for trauma assessment and treatment, are also adequately identified. Legal professionals now have resources available to refer parents for treatment for their own history of abuse and trauma. With appropriate help, parents will feel more empowered and supported by the child welfare system and, in turn, will be more able to support their children.

This fact sheet is one in a series of factsheets discussing parent trauma in the child welfare system. To view others, go to http://www.nctsn.net/resources/topics/child-welfare-system


Established by Congress in 2000, the National Child Traumatic Stress Network (NCTSN) is a unique collaboration of academic and community-based service centers whose mission is to raise the standard of care and increase access to services for traumatized children and their families across the United States. Combining knowledge of child development, expertise in the full range of child traumatic experiences, and attention to cultural perspectives, the NCTSN serves as a national resource for developing and disseminating evidence-based interventions, trauma-informed services, and public and professional education.

The views, policies, and opinions expressed are those of the authors and do not necessarily reflect those of SAMHSA or HHS.