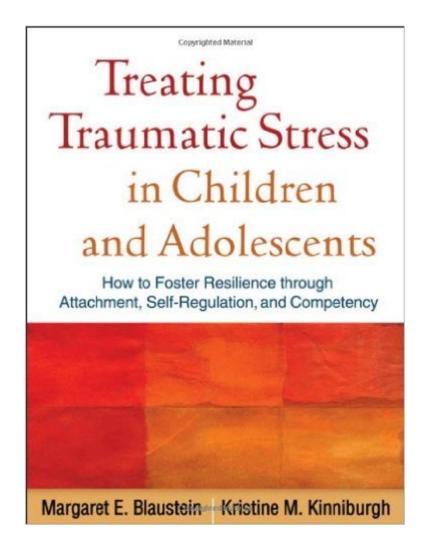
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Treating Traumatic Stress In Children And Adolescents: How To Foster Resilience Through Attachment, Self-Regulation, And Competency





Synopsis

Grounded in theory and research on complex childhood trauma, this book provides an accessible, flexible, and comprehensive framework for intervention with children and adolescents and their caregivers. It is packed with practical clinical tools that are applicable in a range of settings, from outpatient treatment centers to residential programs. Rather than presenting a one-size-fits-all treatment model, the authors show how to plan and organize individualized interventions that promote resilience, strengthen child–caregiver relationships, and restore developmental competencies derailed by chronic, multiple stressors. More than 45 reproducible handouts, worksheets, and forms are featured; the large-size format facilitates photocopying.

Book Information

Paperback: 372 pages Publisher: The Guilford Press; (Lay-Flat Paperback) edition (March 18, 2010) Language: English ISBN-10: 1606236253 ISBN-13: 978-1606236253 Product Dimensions: 0.8 x 7.8 x 10.2 inches Shipping Weight: 1.8 pounds (View shipping rates and policies) Average Customer Review: 4.6 out of 5 stars Â See all reviews (38 customer reviews) Best Sellers Rank: #52,671 in Books (See Top 100 in Books) #15 in Books > Health, Fitness & Dieting > Psychology & Counseling > Psychiatry > Child #55 in Books > Textbooks > Medicine & Health Sciences > Medicine > Clinical > Pediatrics #57 in Books > Health, Fitness & Dieting > Mental Health > Post-traumatic Stress Disorder

Customer Reviews

I wish I had bought this book sooner. As a therapist in a community mental health agency I work with complexly traumatized children, including those in foster care. I've been looking for resources that have explicit information on helping children with self-regulation and this book is a treasure. This is a treatment manual for ARC: Attachment, Self-Regulation, and Competency. While it has components/ building blocks, the authors encourage you to view it as a framework rather than a rigid structure, so that it allows for clinical creativity. The building blocks addressed are as follows: Caregiver management of affect, Attunement, Consistent caregiver response, Building routines and rituals, Affect Identification, Modulation, Affect expression, Strengthening executive functions (impulse control and problem solving), and Self development and identity. There is also a section on

trauma experience integration which reviews various ways to develop a trauma narrative. Each chapter reviews one of the building blocks. Key concepts are provided for the clinician to review with the caregiver, so that the caregiver is involved in treatment each step of the way. There are steps for the therapist to follow along with suggestions for creative, play or art-based activities to help accomplish each goal. Developmental considerations are addressed with adaptations of interventions based on the child's developmental stage/ age. Cultural issues are also addressed, and the authors review how to work with the components in a variety of settings including group therapy, individual/ dyadic (with the caregiver), and milieu (residential) settings. A helpful "Real-World Therapy" section of each chapter addresses practical considerations.

Great information on traumatized children. A detailed and systematic explanation of various tools regarding caretakers and traumatized children. While this book has a great overarching explanation of how to approach youth that have been traumatized, it lacks some practical information that is critical to successful intervention. How do I set firm limits? At what point will the child begin to regulate herself and not rely on my interventions? In what format and delivery is praise and positive feedback most effective? How do I approach children who are not cognitive processors, meaning children that rely on intuition and split second decision making? Most children, and most adults, rely on the preconceptions and prior experience when making the majority of their decisions. How do I develop positive automated responses that do not require cognitive thought? A cognitive approach, one that requires children to think and process their decision making, is bound to fail because few humans have the mental capacity to function cognitively for the majority of the day. This task is especially difficult for traumatized, impulsive children.I'm a special ed teacher and while I found this book informative, I would be eaten alive in my classroom if I used this approach to teach and develop my students. After two or three years I would be burned out and looking for a new occupation. While it is important to be aware of and encourage deeper thinking when it comes to decision making, it is unrealistic to expect the majority of kids to cognitively navigate through their extensive bad habits and trauma induced social/academic deficiencies.

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