

Complex Trauma and Attachment Disruption in Children

How can trauma affect attachment?

Complex trauma occurs when children have had multiple traumatic events with physiological and psychological impacts that have a profound impact on development. Attachment is a bond/connection between one person and another with an emotional relationship with a specific person. The relationship should bring safety, comfort, and pleasure - lack of these evokes distress. Attachment is often characterized by the parental-child relationship and is often a working framework for future relationship.



Why is attachment important?

Attachment offers a secure base and helps children self-soothe and regulate emotions¹. Attachment offers a safe haven, which buffers against stress and uncertainty. Clues for healthy attachment include: holding, feeding, gazing into each other's eyes, and overall positive physical contact. Research shows us that healthy attachment leads to healthy brain development and healthy physical growth.

What behaviors might you observed in a child when attachment has been disrupted?

Aggression (lack of empathy or poor impulse control), immature self-soothing behaviors (cutting, scratching, head-banging), developmental delays or regression, odd eating behaviors (hoarding or hiding food), non-discriminatory attachment (hugging strangers, non-discriminant sexual behaviors). Children with attachment disruptions may present with symptoms that could mimic ADHD.

Attachment and the Brain

Birth to age four is the most influential time for brain development but the brain is capable of change at any time (plasticity). Traumatic memories are stored in the brain, and these memories can be activated (arousal of limbic system), triggering the flight, fight, or freeze response, which are survival mechanisms of the brain. Extensive trauma leads to dysregulation of the nervous system².

What can parents do to help?

Nurture the child, be attuned to their responses, and try to understand the behaviors before punishment (be curious, ask questions about what the child needs). Parents should be regulated, acclimated, and attuned to their own emotions first and then to their child's (parental self care, use friends, family, and support systems), be consistent and predictable because children are sensitive to transitions. Don't take away old coping skills before new ones can be in place, and model appropriate social behaviors to children.

Additional Resources:

Sue Johnson's *Introduction to Attachment: A Therapist Guide to Primary Relationships and Renewal*

Karyn Purvis' *The Connected Child*. "Healing Yourself to Heal Your Child."

Bruce Perry's "Bonding and Attachment in Maltreated Children."
www.childtrauma.org

¹ Janelle Althen. *Class Notes. Trauma and Attachment Problems in Families*

² Janine D'Anniballe. *Understanding the Neurobiology of Trauma*.