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# **ADVICE FOR FAMILIES DURING COVID-19.**

**SPECIFICALLY AIMED AT FOSTER  
FAMILIES, ADOPTIVE FAMILIES,  
KINSHIP CARERS AND ANYONE CARING  
FOR CHILDREN WHO HAVE  
EXPERIENCED EARLY LIFE TRAUMA**

**ENFY S**

**A PSYCHOLOGY LED SERVICE FOR CHILDREN  
WHO ARE LOOKED AFTER**

Our lives have changed dramatically over the last couple of weeks. As parents you may be feeling worried, concerned and a bit lost without your normal daily structure. You may be feeling distracted by the news.

Our children can really struggle during times of uncertainty, they may be feeling fearful of the virus, and trying to adjust to a lack of normal routine. Our children will know that the people around them are worried, they will see worry on our faces. Some will have a full understanding of what is going on, and others may not understand.

This type of situation puts us into **ALARM**, our fight/flight system is activated, resulting in pent up energy. Our children's bodies are being pumped with cortisol (stress hormone) and they may be feeling a bit wobbly, restless, uncertain and fearful. Having to stay at home can make us feel trapped in this situation. This may remind them of other situations they have felt like this.

The energy that is pent up inside of them (and us!) when we are in alarm needs to be regulated, more than ever, our children need help with regulating. This pack includes tips of regulation, how to talk about COVID-19, therapeutic parenting and self care.

Hang in there, you are all doing amazing jobs and we care about you!

**Enfys** (Developmental Trauma Team)



# Hand as Brain

- The fingers represent the cortex – thinking brain
- The thumb represents the limbic system – the emotion centre
- The base of our hand and wrist represents the brainstem that connects the brain to the rest of the body.



**The 'wise' brain** – when we are feeling calm and our thinking brain (the fingers) is in control.

Our children can really struggle during these times of uncertainty and they will know that the people around them are worried. This type of situation may cause us to 'flip our lid' more often.

As a result of the alarm system being activated, you may notice a change in your child's behaviour as a result of being unable to verbally communicate their concerns. This also might result in pent up energy and along with having to stay at home, children may feel trapped.



**'Flipping our lids'** – when we are in survival mode (fight/flight/freeze/appease)

Our fingers lift up or we 'flip our lids' and our thinking brain (the fingers) goes offline.

We are now in survival mode and our emotion centre (the thumb) is in control.

We can flip our lids in a split second and stay in survival mode for a while and/or move from lid on to lid off many times during an hour/day. Some children flip their lids continually throughout the day or may be able to 'hold it together' during the day than as soon as they get home they move into survival mode (flip the lid).

Adapted from Dr. Daniel J. Siegel's Hand Model of the Brain found in Mindsight: The New Science of Personal Transformation (Bantam Books, 2010)

## Your child may be flipping their lid!

As a result, home-schooling may be challenging!

We need to feel safe in order to be able to learn. If our lids are flipped and we are in a survival state or feeling threat for some reason, *it is not possible to learn!*

Be sure to use lots of connection and regulation activities to ensure a feel of safety and attachment before any learning!

## Chronological Ages vs. Developmental Ages

Children all have a chronological age. This is the age that they are based on their date of birth. As well as this, children have a developmental age. This is the age they are **functioning at** emotionally, physically, cognitively and socially.

Below is a quick reminder of what each of these areas of development are:

Emotional Development	The child's age according to their capacity to know what feelings are, to be able to 'regulate' or manage their emotions; to experience joy; to experience empathy for others; to control their impulses
Physical Age	The child's age according to their physical appearance; gross and fine motor skills, co-ordination and physical agility
Cognitive Age	The child's age according to their thinking and reasoning skills; academic performance in terms of language, literacy and mathematical thinking
Social Age	The child's age according to their capacity for co-ordinated play; sharing, co-operation, collaboration and conflict resolution

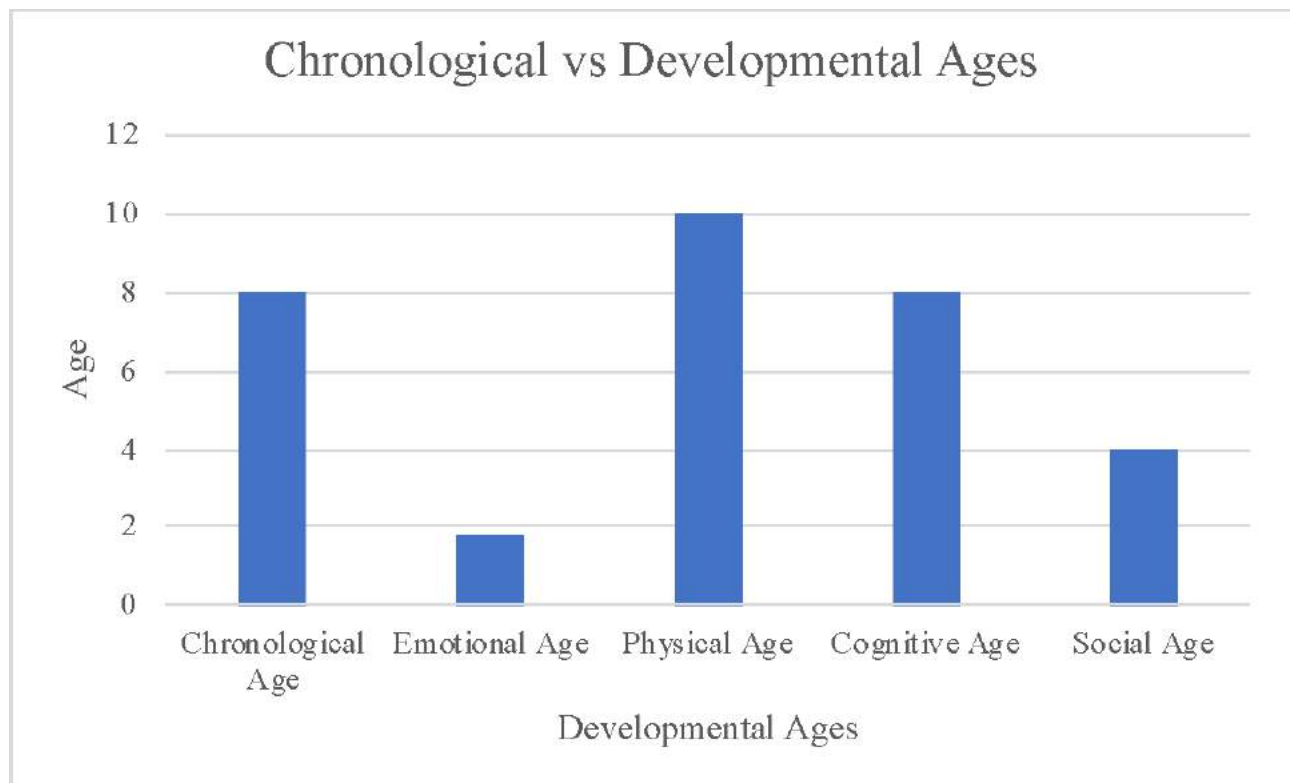
Children who have experienced developmental trauma and adversity will likely have different (usually younger) developmental ages. This is because when children do not have a caregiver who is able to recognise and respond to their needs, they are delayed in reaching their developmental milestones. They are effectively 'stuck' at their stage of development until they are in a nurturing environment with a caregiver who is able to support them to develop.

A child in your care, for example, may have a chronological age of eight. However, developmentally this child may function at the emotional age of an 18-month-old. This is because they have not yet had a caregiver who is able to identify their needs and feelings, name them, and then reflect back to the child what that feeling is before they go on to meet that need.

Perhaps this eight-year-old child is feeling tired and becoming frustrated at not being able to complete their homework. The caregiver says, *'I can see you are finding this really tough. I wonder whether you are feeling tired and fed up, which is making this extra tough for you to do right now. Let's have some quiet time. We can come back to this tomorrow morning after you have had a good night's sleep.'* This is the caregiver responding to the child as though they are 18 months old. When the caregiver repeats this over and over again, it stops the child from being 'stuck' at that stage of development. The caregiver is gradually helping the child 'catch up' and progress in their emotional development.

As I am sure you already know all too well, it takes a lot of time, effort and patience to be able to parent a child who has different chronological and developmental ages. Whilst it is understandable to expect a typical child of eight to be able to let us know they are feeling tired and that they need a break, this is simply not the case for our children. We have to work hard to make sense of the child's experiences and reflect this back to them. We cannot expect our children to be able to let us know what their needs are when they have not yet been taught what their feelings are or mean.

What can make meeting a child's needs based on their developmental age even more tricky is that they can have big variation in their emotional, physical, cognitive and social developmental ages. This is shown in the graph below using the example of the eight-year-old child:



It is especially difficult for caregivers to parent a child who has a profile like this with such variable developmental ages. The graph above shows that this child looks more physically mature than their chronological age. We know that when a child looks older, it is so easy for adults to over-estimate their abilities. In this case, the child is also doing well academically.

Without thinking about the differences between chronological and developmental ages, we can easily fall into the trap of assuming that our children are functioning as well as they are in one area across the board. To try and reduce the risk of this, it can be useful to draw a graph for your own child. Have a think about what age you would place them at across their emotional, physical, cognitive and social development.

Parenting a child according to their different developmental ages is hard! It can feel like constantly running up and down a set of stairs, meeting the child where they are at according to each different developmental age.



Please know that even though it might feel frustrating and exhausting, with your continued patience you are allowing your child to 'catch up' across all areas of their development. Understanding that your child will likely have different developmental ages can help you have more realistic expectations for them. It can also help you to feel empathy for and connection with your child. After all, it is through no fault of their own that our children were born into environments where they did not receive the nurturing experiences they needed to achieve their milestones. All of your efforts now are helping children to heal from their early trauma, no longer being 'stuck' at a younger developmental age and being supported to reach their full potential.

You might be reading this and thinking, 'Well that's all well and good, but how is this relevant to COVID-19?!' Firstly, it is important to recognise that in the current climate of uncertainty and anxiety, it is likely that our children will display behaviours that you might expect from a much younger child in greater frequency. This is sometimes called 'regression' or 'regressive behaviour'. Regression tends to be linked to stress, which we are all faced with in abundance right now. Remembering that our children are likely to have different chronological and developmental ages, as well as recognising that we may see more behaviours that challenge us, can help us to understand and handle behaviours that do not seem to make sense.

Finally, it is important to acknowledge that your efforts have great potential to positively impact your child's development. Just as we should meet our children with realistic expectations during these exceptional circumstances, please also remember to be gentle with yourselves. You are all doing the best you can.

# MANAGING CORONA VIRUS (COVID-19) ANXIETY



## For You

- Avoid excessive exposure to media coverage
- Connect through calls/text/internet
- Add extra time for daily stress relief
- Practice self-care
- Focus on your mental health

BlessingManifesting

## For Kids

- Reassure them that they're safe
- Let them talk about their worries
- Share your own coping skills
- Limit their news exposure
- Create a routine & structure

## For Quarantine/Isolation

- Keep in contact with your loved ones via social media, texts, and phone calls
- Create a daily self-care routine
- Keep yourself busy: games, books, movies
- Focus on new relaxation techniques



# TIPS FOR CONVERSATIONS ABOUT COVID-19 WITH CHILDREN AND YOUNG PEOPLE:

1

## EASE YOUR OWN ANXIETY FIRST

Children/young people will follow their parent's example. So remain informed by reliable sources and know when to 'switch off' from news and social media.

2

## BE CLEAR

Tell your child what's happening, be clear about the facts, look at good news sources, tell children they are not in danger, they need to hear the message "you are safe, I've got this, I'm in charge, that's grown up stuff, I'll deal with it."

3

## AGE APPROPRIATE EXPLANATIONS

Consider your child's emotional age. Later on in the pack we have included a child friendly way to explain coronavirus. Explain the reasoning for changes in daily life e.g. social distancing. With younger children it may be more useful to reinforce what to do e.g. wash your hands whilst singing 'Happy Birthday' twice.

4

## REMAIN EMPATHIC

Validate your child/young person's concerns and don't dismiss them. Help to mitigate their concerns by providing reassurance.

5

## MONITOR YOUR CHILD'S STRESS LEVEL

Changes in a child/young person's behaviour may be as a result of difficulties in expressing their concerns verbally. Consider what your child is trying to communicate with you, what is the hidden need behind the expressed behaviour?



## Support for your children

This pack includes information on; structure and routine, regulation, sensory activities and therapeutic parenting skills.

### Structure and Routine

Structure and routine are very important in times of uncertainty, it will help our children to feel safe.

1. Have a very strong routine - set up the day like a school day, get up at the same time, break times and lunch times at the same times as normal.
2. Make visual schedules – e.g. 1 hour in garden, 1 hour on tablet.
3. Get them outside for their exercise once a day– walking, running, bike ride.

An example schedule is laid out below:

### COVID 19- Daily Schedule

Before 9:00	Wake Up	Eat Breakfast, make your bed, get dressed, put PJ's in laundry
9:00-10:00	Morning walk	Family walk with the dog, Yoga if it's raining
10:00-11:00	Academic Time	NO ELECTRONICS Sudoku books, flash cards, study guide, Journal
11:00-12:00	Creative time	Legos, magna tile, drawing, crafting, play music cook or bake etc
12:00	Lunch	
12:30 PM	Chore Time	A. Wipe all kitchen table and chairs B. Wipe all door handles, light switches and desktops C. Wipe both bathrooms- sinks and toilets
1:00-2.30	Quiet Time	Reading, puzzles, nap
2:30-4:00	Academic time	ELECTRONICS OK Ipad games, Prodigy, Educational Show
4:00-5:00	Afternoon Fresh Air	Bikes, Walk the dog, play outside
5:00- 6:00	Dinner	
6:00-8:00	Free TV time	Kid Showers 3x
8:00	Bedtime	All kids
9:00 PM	Bedtime	All kids who follow the daily schedule and don't fight

There are lots of ideas online for indoor activities if you need some more inspiration!

# 100+ INDOOR ACTIVITIES

## CRAFTS

MAKE PAPER AIRPLANES  
SALT PAINTING  
MAKE SUNCATCHERS  
MAKE SALT DOUGH  
MAKE SPONGE STAMPS  
MAKE A CEREAL BOX AQUARIUM  
MAKE SCRATCH ART  
MAKE YOUR OWN BOOKMARKS  
PAINT PET ROCKS  
MAKE RECYCLED CRAYONS  
MAKE PAPER BOATS  
FINGER PAINT  
MAKE FRIENDSHIP BRACELETS  
MAKE A BIRD FEEDER  
MAKE PAPER BAG PUPPETS  
MAKE HANDPRINT ART  
MAKE A SCRAPBOOK  
DECORATE T-SHIRTS  
MAKE A THANKFUL JAR  
PAINT LEAVES  
MAKE A TIME CAPSULE  
MAKE BUTTON ART  
PAINT WITH WATERCOLORS  
COLOR IN A COLORING BOOK  
MAKE PAPER CRAFTS  
BUILD A CARDBOARD CASTLE  
MAKE TISSUE BOX MONSTERS  
MAKE A TOILET PAPER ROLL BUTTERFLY  
STAMP WITH CELERY  
MAKE CHALK ICE  
MAKE PUFFY SIDEWALK PAINT  
DRAW A SELF PORTRAIT  
USE RUBBER STAMPS  
DO SCRAPE PAINTING  
PAINT A RECYCLED JAR  
MAKE SUPERHERO COSTUMES

## ACTIVITIES

MAKE PLAYDOUGH  
MAKE SLIME  
MAKE PLAY MUD  
MAKE RAINBOW RICE  
MAKE FAKE SNOW  
MAKE A SENSORY BIN  
MAKE A SENSORY BAG  
BUILD A FORT  
HAVE A PILLOW FIGHT  
WRITE A STORY  
MAKE ICE CREAM IN A BAG  
MAKE GUMMY BEARS  
MAKE FRUIT ROLL-UPS  
HAVE A MOVIE DAY  
PUT ON A FASHION SHOW  
BAKE CUPCAKES OR MUFFINS  
DO YOGA  
BUILD AN OBSTACLE COURSE  
MAKE DINNER TOGETHER  
PLAY WITH MAGNETIC TILES  
BUILD SOMETHING WITH LEGO  
USE DOT MARKERS  
BUILD A STACK OF CARDS  
PUT ON A PUPPET SHOW  
MAKE A TREASURE HUNT  
INDOOR BOWLING  
LEARN TO DRAW  
PUT ON A PLAY  
MAKE INDOOR HOPSCOTCH  
DO A FAMILY CHORE TOGETHER  
HAVE A DANCE PARTY  
HAVE A TEA PARTY  
PLAY WITH WATER IN A BIN  
SET UP A PLAY STORE  
MAKE A SOCK TOSS GAME  
MAKE PERLER BEAD ART  
WRITE IN A JOURNAL

## GAMES

PLAY WOULD YOU RATHER  
PLAY I SPY  
PLAY SIMON SAYS  
PLAY BOARD GAMES  
PLAY HIDE AND SEEK  
INDOOR SCAVENGER HUNT  
PLAY BINGO  
PLAY CARD GAMES  
DO A PUZZLE  
PLAY CHARADES  
BUILD YOUR OWN GAME  
PLAY FREEZE DANCE  
PLAY HOT POTATO  
PLAY MARBLES  
KEEP THE BALLOON UP  
PLAY DOMINOES  
PLAY HANGMAN  
PLAY TIC-TAC-TOE

## EDUCATIONAL

READ BOOKS  
DO A SCIENCE PROJECT  
LEARN ORIGAMI  
LEARN ABOUT A NEW ANIMAL  
LEARN A NEW CARD GAME  
LEARN TO SEW  
LEARN TO KNIT  
DO BRAIN TEASERS  
LEARN A NEW LANGUAGE  
LEARN ABOUT A COUNTRY

Regulation means managing our thoughts, feelings and sensations. Our children need extra support with this as they are not always able to identify and label big feelings.

# REGULATION

OUR CHILDREN NEED TO  
REGAIN A SENSE OF AGENCY  
AND CONTROL THROUGH:

1

## MOVEMENT

walking, running, jumping,  
stretching, star jumps!

## MAKING SOMETHING

2

music, art, baking

3

## CONNECTION WITH OTHERS

video call to family/friends,  
hugging a pet).



Our occupational therapy colleagues provide the following advice to help with  
regulation using sensory strategies.

SENSE	CALMING	AROUSING
Oral – taste and chewing	Chewing on hard sweets e.g. wine gums Sucking on hard sweets Crunchy and chewy foods e.g. popcorn, cut up hard vegetables Blowing bubbles Sucking thick liquids through a straw e.g. milkshake	Sour, salty, spicy or bitter tastes Very hot or very cold foods Carbonated drinks
Proprioception	“Heavy Work” meaning to input to muscles, tendons and joints Wheel-barrow walking, pulling and pushing furniture, carrying heavy equipment, tug-o-war, digging the sand pit or garden	Proprioceptive based activities are rarely arousing
Touch	Fidgeting or squeezing play dough, putty, stress balls Deep pressure through firm prolonged touch to the body especially around the shoulders, chest, hips “Hot Dog” game – wrap up in a blanket and “squash”, deep “bear hug” or massage Warm bath or wrapping up in a warm blanket Playing with play dough or clay	Light touch such as tickling, light back scratch, petting a dog or cat
Movement	Regular rhythmical bouncing on a gym ball or trampoline or rocking chair Up and down and back to front movements	Fast irregular and non-rhythmical movements Circular and rotatory movements
Hearing	Consistency in noise levels Quiet calm and well-paced voices Consistent rhythms	Variations in noise levels Erratic, loud or screaming voices Variations in rhythms e.g. fast and slow music combined Sudden unexpected noises
Vision	Soft consistent lighting Minimal bright lights and visually distracting objects Natural lighting Pastel colours Sparsely decorated rooms	Variations in colour Fluorescent lighting Artificial lighting Bright colours Cluttered rooms

It's really helpful to provide a retreat; a quiet corner with pillows, soft mats, beanbags and sensory fidget toys.

Source: Occupational Therapy for Children and Young People department, Cardiff and Vale UHB.

Below is an example of how a child may be feeling when they are low, high and just right. With examples of activities which can be used to achieve a 'just right level'.

<b>My engine is LOW</b>  I feel <ul style="list-style-type: none"> <li>• bored</li> <li>• tired</li> <li>• sleepy</li> <li>• like doing nothing</li> </ul>	<b>My engine is HIGH</b>  I feel like <ul style="list-style-type: none"> <li>• my head will explode</li> <li>• running fast</li> </ul>	<b>When my engine is just RIGHT</b>  I feel <ul style="list-style-type: none"> <li>• Happy</li> <li>• Ready to work</li> <li>• Able to listen</li> </ul>
To go faster I can <ul style="list-style-type: none"> <li>• Take a walk</li> <li>• Chew gum</li> <li>• Eat crunchy food</li> </ul>	To slow down I can <ul style="list-style-type: none"> <li>• Rock in a rocking chair</li> <li>• Do wall press ups</li> <li>• Listen to Music</li> </ul>	To stay just right I can <ul style="list-style-type: none"> <li>• Relax</li> <li>• Use movement breaks</li> <li>• Have a fiddle toy</li> </ul>

Source: Occupational Therapy for Children and Young People department, Cardiff and Vale UHB.

Use a PACE approach:

# PACE

**PACE IS A WAY OF THINKING,  
FEELING, COMMUNICATING  
AND BEHAVING THAT AIMS TO  
MAKE THE CHILD FEEL SAFE.**

**P**

## LAYFULNESS

Create an atmosphere of lightness and interest when you communicate. Use a light, story telling tone with your voice. It's about having fun, and expressing a sense of joy. Sometimes a troubled child has given up on the idea of having good times. Playfulness allows children to cope with positive feelings. When children laugh and giggle, they become less defensive or withdrawn, and more reflective.

**A**

## CCEPTANCE

Unconditional acceptance is at the core of the child's sense of safety. Acceptance is about actively communicating to the child that you accept the wishes, feelings, thoughts, urges, motives and perceptions that are underneath the outward behaviour. It is about accepting, without judgment or evaluation, her inner life. The child's inner life simply is; it is not right or wrong..

**C**

## URIOSITY

Curiosity is wondering about the meaning behind the behaviour for the child. Curiosity lets the child know that the adults understand. This is how we help children become aware of their inner life. Curiosity involves a quiet, accepting tone that conveys a simple desire to understand the child. Asking "I wonder what...?" rather than "why did you do that?"

**E**

## MPATHY

Empathy lets the child feel the adult's compassion for her. Being empathic means that the adult is actively showing the child that they want to be with the child in her hard times. With empathy, when the child is sad or in distress the adult is feeling the sadness and distress with her and lets the child know that.



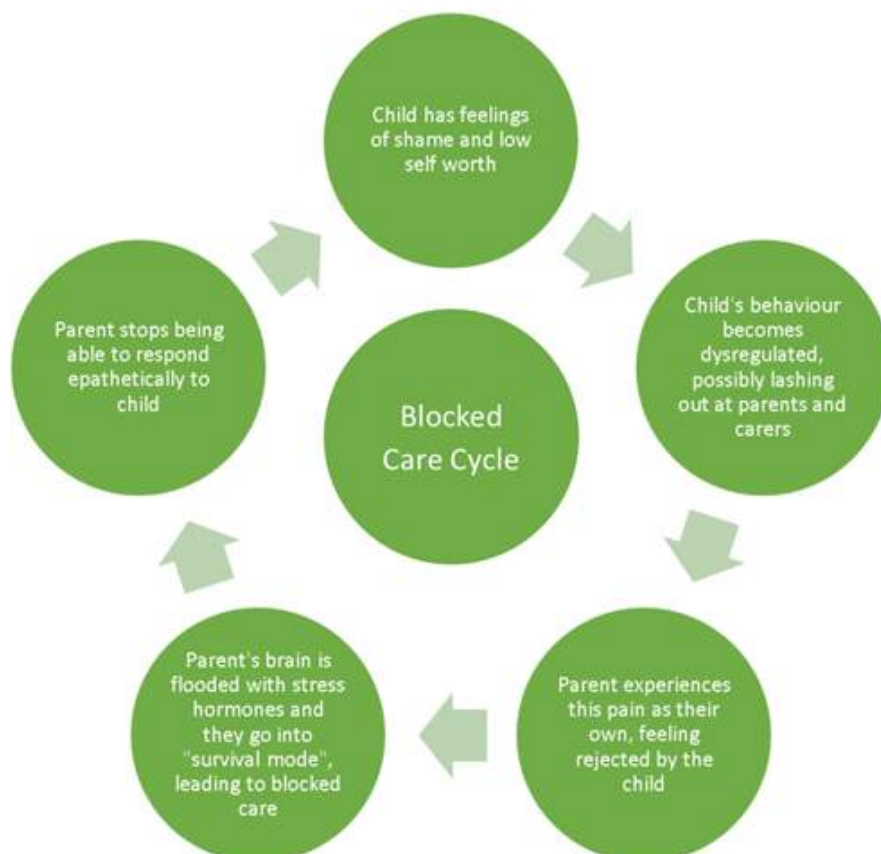
## Support for you

### Blocked care

Whilst at home with our children for such an extended period of time, it is likely that we may be more susceptible to blocked care than we would be usually. Blocked care (also known as Compassion Fatigue) describes how stress can suppress a carer's capacity to feel love and empathy towards a child. It stems from a need for self-protection and defensiveness against a child's insecure attachment behaviours that challenge which is described as some as a primary trauma. Furthermore, carers live, experience and listen to the trauma that children lived. Listening to traumatic experiences of your child can be equivalent to experiencing secondary trauma stress.

As a result of listening to this trauma and being exposed to challenging behaviour, we become over reliant on our limbic system to protect ourselves, which is responsible for our fight/flight response. Relying on the limbic system means our response to our children can become defensive leading to feelings of resentment, anger and a lack of empathy towards the child. It tends to lead to a reactive style of parenting whereby we focus on the immediate behaviour and the most negative aspects of our child, rather than focusing on connecting with the child and being curious about why they are behaving in this way. You may feel as though you are able to respond to the child's basic needs e.g. getting them dressed, preparing food for them, washing their clothes. However, when experiencing blocked care, it is hard to feel warmth or joy in the relationship with your child and therefore you may not feel as though you are able to do any aspects of parenting other than meeting the child's basic needs.

Other symptoms of blocked care include anxiety, fear, panic attacks, heightened emotions including frequent crying and anger, as well as re-experiencing traumas in the carer's own life. Additionally, we may experience a loss of purpose, sleep disturbance, hyper-vigilance, pervasive hopelessness, self-doubt withdrawal/isolation, apathy, decreased sexual intimacy, feeling overwhelmed, and poor self-care.



Blocked care is a completely normal experience, and something that we expect most foster carers to experience at some point. It is a natural response within the brain as it is trying to protect us, and we do not have any control over this response. However, there are ways in which we can try and get out of experiencing blocked care. The main way we can stop feeling as though we are in blocked care, is through self-care.

## Self-care

During this time, self-care is **more important than ever!** There is so much uncertainty and anxiety in the world at the moment. We are having to spend more time than ever at home with our children, and so need to spend more time than ever looking after ourselves. This can be hard when our children are living at home with us, normally we might have a chance to be have half an hour to ourselves whilst our children are at school. It is important to think about how we can make time for ourselves even whilst our children are at home. This might be whilst they're doing some schoolwork or watching some TV or doing a jigsaw.

Dan Siegel says that there are seven things we should be doing for ourselves each day to keep our minds healthy. Below is a diagram of the seven areas. It is worth thinking about which areas you are already doing great at, and which areas you need to spend more time doing. Some of the areas e.g. connecting and physical time will need to be amended during self-isolation. Are there people you could video call? Are there online tutorials you could follow for physical exercise indoors?



There are other helpful resources on the **'National Association of Therapeutic Parents' and the 'Centre of Excellence in Child Trauma' Facebook pages.**

Examples of support include:

- A care experienced adult (Rosie) is doing a daily story time (she reads a book aloud, so you can go and have a cup of tea!).
- Videos of Rosie and her children doing sensory and messy play activities are also going up to give you some ideas of things to do with your children.
- Virtual listening circles also available on the Facebook page – you can see people's faces from all around the world and share problems with parenting and caregiving.

Also take a look at [www.stepiau.org](http://www.stepiau.org) for COVID-19 related self-help and wellbeing information.

Keeping your mind healthy and looking after yourself is really important for coping with the current situation. You cannot pour from an empty jug; you need to be able to look after yourself in order to look after your children in the best way possible during this time.

### Extra resources

Have a look at the Beacon House website: <https://beaconhouse.org.uk/resources/>

Beacon House develop freely available resources so that knowledge about the repair of trauma and adversity is in the hands of those who need it.

- Currently there are videos uploaded about staying connected through the COVID-19.
- Different professionals upload videos - e.g. an occupational therapist has uploaded a video on how to make an obstacle course at home (a good activity for regulation).

### Contact Us

We have a new online platform, which we will be updating regularly:

<https://en-gb.padlet.com/Enfys/covidresources>

The **Enfys** team are working hard to maintain services at this time. If you would like to speak to a member of the team, please email [enfys.cav@wales.nhs.uk](mailto:enfys.cav@wales.nhs.uk)

### A closing message from the Centre of Excellence in Child Trauma:

*"These days are replicating the early lost nurture for some of our children. Those times when new-born babies are born into a nurturing family unit where we stay indoors a lot and just bond as a family, learning the child and establishing new routines.*

*We have now removed the daily cortisol spikes which plagued our lives and fed our children's fear-based behaviours. So, although this time will be one filled with challenges, it is also a golden opportunity to re-launch and consolidate your attachment relationship with your children."*