

About Deborah Hage:

Drawing on 50 years of experience, both as a parent of 14 foster and adopted children and as a reactive attachment disorder therapist, working with emotionally and behaviorally impacted children (resulting from early childhood abuse and neglect), Deborah specializes in coaching parents help their children adjust and heal from past traumas, overcome their fears, and effectively integrate into their new families and environments. As a lecturer, author, therapist and coach, Deborah has helped thousands of families overcome the impacts of past neglect, abuse and other traumas; providing the support and tools they need to create for themselves a happier and more connected life.

The ideas and interventions presented here have not been developed solely by Deborah. She has worked with numerous other therapists and parents over the years, notably Nancy Thomas, whose continued partnership and collaboration she appreciates.

To learn more about Deborah, her practice and her family, please visit deborahhage.com

Children develop in various areas: physically, mentally, emotionally. Assessing the child's emotional age as opposed to the chronological age is critical.

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Emotional and Chronological Ages

Children who have been traumatized are often “stuck” developmentally at the age the trauma occurred. While their physical bodies and cognitive functions continue to grow their emotional stability remains much less developed. A child can ride a bike, dance, play a musical instrument, accomplish mathematical computations, read, and understand scientific principles at grade level or above and still be completely unable to manage their emotions. They are often very infantile in their emotional response to events. A parent thinks they are just asking their child to take out the trash and the tantrum that follows is completely out of proportion to what the parent believes is a reasonable request. (See Paradoxical Techniques to help avoid such scenarios.)

There is a reason why a traumatized child has little to no ability to regulate his emotions. A primary function of parents in the first months and early years of life is to teach emotional regulation. Initial interactions between a parent and child are very simple. The infant has a need and cries. He does not sit up and say, “I am hungry”. He cries. He tantrums. The attuned parent figures out what the need is and responds to the cry with interactions that release serotonin and endorphins to soothe the crying: Touch, Eye contact, Movement, Vocalizations, Food (sweet), and Smiles. The parent satisfies the need and the child is soothed and trusts the next time he has a need he can express it by crying and he will be soothed. The thousands of repetitions of this cycle create a trust response in the child for the parent and models for the child that as he grows older he can draw on that sense of trust and security to soothe himself. As language skills increase he is able to use words instead of wails to more clearly communicate to his parents what he needs.

However, when there is no attuned parent the child simply cries and cries and no one comes to soothe him. He feels ignored and insignificant. No one cares what he needs, there is no one to trust outside of himself, so he will not care what others need. He will self-parent and

woe to anyone who attempts to tell him what to do. No one models for him that words have power to communicate more clearly than crying and screaming. The neuron connections in the brain that need to be made for children to develop the ability to talk calmly about what they want to communicate are not there. Trauma that occurs before a child learns to talk typically leaves the child unable to verbalize thoughts and feelings so must act them out.

It is not that the child does not want to talk about what he needs, wants, or feels. It is not that the child gets up in the morning saying, "Today, I am going to make everyone around me miserable by not doing anything I am told and by screaming whenever I feel like it." He looks around at other children in the family and fellow students and cannot figure out why they are so calm and cooperative and he is not. However, unbeknown to him his brain was high jacked. At a critical stage of development he was abused, abandoned, and/or neglected and the wiring in his brain that needed to take place did not occur. Simply, he does not have the neuron connectors to respond in an age appropriate manner.

When one looks at a child's over reactive response to an event it is often age appropriate....but for a much younger age. It is not appropriate for a child that is 10 years old chronologically. However, it is age appropriate for a child stuck at the emotional age of when they were traumatized. Knowing what that age is can be determined and must be determined in order to apply appropriate tasks, consequences, rewards and therapeutic goals

How old was the child when the trauma, separation, abuse, neglect occurred? The child is very probably stuck at that age. The earlier the trauma the younger the emotional age. What level of supervision does the child require in order to do what they need to do?

Conscience/ego/emotional development. Where is the child on this chart?

Ages 0 – 1 Child does what is right because parents do it for them. Dress the child, feed the child, clean up after the child, bathe the child, keep child safe

Ages 1 – 2 Child does what is right by following parents voice commands while parents are in the room. Stop, come, go, sit, stay. Parents are available to reinforce voice physically. For example if child crawls toward the top of the stairs the parents tell the child to stop, but if the child does not stop then the parents physically intervenes, picks up the child and moves him/her from danger

Ages 2 – 3 – Child does what is right while parents are in the room, having internalized parent's voice. Parents are available to reinforce voice by stating wishes out loud and, if necessary, intervene physically.

Ages 3 – 4 – Child does what is right when in a different room, having internalized both voice and presence of parents. However, parents close by to intervene both verbally and physically if necessary.

Age 5 – Child does what is right when in a different location from parents. Ready to take internalized voice and presence to school and be cooperative and attentive. Transfers internalized voice and presence to teacher and other authority figures.

Ages 6 – 12 Child does what is right due to internalization of parents voice and presence and fear of consequences

Ages 13 - 16 Child does what is right because it is right. Complete internalization of parental voice and presence, incorporating it into own desires

Ages 16 – 20 Child experiments with not doing what is right to see how that works in their life, rejects parental values as a means of accomplishing separation

Ages 21 + Returns to doing what is right, having found it works out the best for him/her and they are happier doing what is right

Determining emotional age makes it possible for parents, teachers and therapists to determine what are and are not appropriate tasks, consequences, and behavioral expectations. If a child is the emotional age of 2 then the parent would do chores and tasks with the child. Make the bed with the child. Clear the table with the child. There would not be the expectation that a 2 year old would put toys away by himself. Two year olds work best when they work next to an attuned adult who is lavish with vocalizations and praise. That is how parents teach their children language. “Oh, look! Here is your train. Where do you think it goes?” Attuned parents babble on and on to their children. They ask very few questions. They explain and explain again, never tiring of teaching their child new vocabulary and new skills. The same process can be applied to traumatized children with great success. Key is parenting their emotional age, not their chronological age.

The chart can readily be used as a therapeutic tool with the child. In conversational tones the therapist explains to the child the role trauma, abuse, neglect, and/or abandonment plays in creating brains that do not work as they need to in order for the child to grow in all areas of their life. Children need to grow physically, intellectually and emotionally. Engaging the child by asking, “How old are you?” “Are you about the right size for that age?” “Wow, then despite the rough beginnings you had in life you are right on target physically! That is great!” “How are you doing in school? Are you able to read what the other kids are reading?” “Great! Then your brain is just ticking along as it is supposed to be, despite its rough beginnings.” “Let’s go over this chart. I want you to think about your ability to do things your mom asks you to do.” Lead the child through the entire chart. Then go back over the chart, starting at infancy. Tell the child he is free to engage his mom and ask her what she thinks as well. (Mom is welcome to participate in this discussion as long as she does not use it as a springboard to complain about all the things he has not done.) This is just a fact finding, compassion seeking, search for understanding of the stage of brain development the child possesses. It is not good or bad. It just is. The child is typically then ready to hear that he has a baby heart in a 10 year old body. Everything he is doing is normal at that stage of development. It is good that he is letting us know when he was hurt and how painful it was.

This sets the child up to be asked if he wants to grow his heart to be as strong as his body and mind or if he likes it the way it is. Typically, children do not like being told they have a baby heart and want help growing it up. Contracting with the child to help grow their heart smoothly follows.

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