

The Resilience Guide



Strategies for Responding to Trauma in Refugee Children



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Supporting Child Care in the Settlement Community / Soutenir les services de garde d'enfants dans la communauté d'accueil

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• PREFACE •

Your care and compassion can help families to overcome trauma.

For almost two decades, CMAS has had the privilege of supporting programs in their important work with newcomer and refugee children and families. Since publishing *Care for Syrian Refugee Children: A Program Guide for Welcoming Young Children and Their Families* in 2015, we have travelled across the country consulting with experts, including people like you who work hands-on with families when they need support the most. This guide is a reflection of all that we've learned about how to support refugee families.

What program staff have told us, above all else, is that families who have faced forced migration are resilient. And studies show that supportive relationships are the most important factor in helping to foster resilience in children who have been exposed to trauma. Your support, care and compassion are what make the greatest difference for the children in your program.

In these pages you'll find information about refugee trauma, potential developmental effects, and key strategies that foster the resilience of children and families. The guide also includes tip sheets filled with practical strategies that are designed to be taken straight off the page and put into practice.

By combining the care and compassion you show on a daily basis with the information and strategies you'll learn in this guide, you'll be well on your way to making a lasting difference. Working together, one child at a time, one day at a time, and one supportive act at a time, we can help refugee families to heal from trauma and to regain the sense of security many of them have lost. And, in doing so, help families to step forward with confidence into their new lives in Canada.

Special Thanks...

Special thanks go out to Heather Savazzi, Julie Dotsch and Mary-Jo Land for their key contributions, invaluable expertise and insights. Their ongoing commitment to immigrant and refugee children and families is truly inspiring.

We would also like to thank Michael Ungar, Jennifer Pearson and Darlene Kordich Hall for sharing their research and expertise on resilience, as well as all the CNC program administrators and staff who have shared their strategies and stories and provided feedback and insights. You make a difference in the lives of each child and family that you work with, and we have so much appreciation and respect for the important work that you do.

Yours in partnership as we work toward the successful settlement of immigrant and refugee children,



Susan Hoo
Manager, CMAS



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Why Understanding Refugee Trauma and Resilience is Important

Two-thirds of Syrian refugee children have lost a loved one, had their house bombed or shelled, or suffered war-related injuries.

Invisible Wounds: The impact of six years of war on the mental health of Syria's children, Save the Children, 2017.

Many of the things we already do in early childhood programs—like providing safe, predictable routines; helping children manage feelings and behaviours; and providing creative, sensory and physical activities—not only support healthy child development, but also strengthen the capacity for resilience and recovery in young children who have experienced trauma.

Trauma can impact a child's attachment and ability to bond with family, their alertness and attentiveness, their ability to play and control their behaviour, and their overall development. Temporary challenges or regression due to trauma can also sometimes lead to children being misdiagnosed with special needs.

Refugee families with young children¹ need responsive programs and professionals who understand:

- the impact of the refugee experience,
- the developmental effects of trauma and resettlement, and
- key strategies to strengthen families' capacity for resilience and support their settlement.

¹While the terms “refugee families” and “refugee children” are used throughout this document to increase readability, it is important to recognize that children and families are not defined by their experiences and that, for this reason, the preferred terms are “families who have experienced forced migration” and “children who have experienced forced migration.”

• INTRODUCTION •

Refugee families face adversity.

There are more recent refugee children and families in Canada than ever before.

No two refugee experiences are the same, but when families are forced to flee from their home country, it's common for them to have spent months—or even years—in countries of asylum where access to shelter, food, water, work and education were limited or non-existent, and daily life was a struggle.

They may have been through a tremendous amount of adversity and experienced a great deal of change and loss. Many families will have witnessed or experienced violence and have lost or been separated from loved ones. The grief can be overwhelming for parents and children alike.

Early childhood programs can help refugee families to build on their strength and resilience.

When we look at the research on trauma and resilience, it's clear that **early childhood educators and early years programs are uniquely positioned to help refugee families with young children as they cope with the effects of trauma.**

We used to think of young children as innately resilient and able to bounce back from adversity. And many children who have experienced forced migration do respond with incredible resilience.

Refugees are survivors. Yet even when parents do the best they can with the skills and resources they have, their ability to connect with, respond to, and care for their children can be compromised by their own trauma, suffering and struggles—and the extreme nature of their child's experiences can affect development and create unique settlement needs and challenges.

Your role as an educator and caregiver is incredibly important and can have a tremendous positive and long-term impact on the well-being of refugee children and families.





How does the refugee experience impact young children and their families?

What is trauma?

For the purpose of this guide, it's helpful for us to broadly define refugee trauma as an adverse experience that overwhelms a child's/parent's ability to cope and/or leaves them fearing for their safety or the safety of loved ones.

The causes of trauma can be direct or indirect.

Trauma in young children can be caused by:

- A direct experience (chronic/extreme fear; persecution; witnessing the injury, death/loss of a family member; lack of access to shelter, food, water, education, safety and/or medical care)

or

- An indirect experience (trauma that impacts parental functioning, watching parents suffer, witnessing violence/persecution/trauma of others who are not related)

Risk Factors

For refugee families, the degree of trauma experienced will depend on how much time the family spent in crisis before migrating. They may have experienced:

- pervasive fear and/or chronic stress (personally and in family members);
- war and persecution, chaos, sights/smells/sounds of war;
- loss of daily routines, predictability and comfort;

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- injuries, death and separation from family members;
- insecurity of basic necessities (food, water, safety, work, education, prenatal/medical care); and/or
- loss of home, community, friends and neighbours, possessions.

They also might have had a particularly difficult or lengthy journey to safety that included:

- exposure to harsh weather, violence, persecution;
- dangerous living conditions while travelling (crime, rape and ongoing violence);
- prenatal stress and lack of adequate nutrition and care;
- pre-existing illnesses and conditions; and/or
- loss of documentation.

Protective Factors

If the family is able to stay together and a child's attachment system remains intact, available and responsive, young children are often well-protected from the negative effects of trauma.

The degree of trauma is also dramatically decreased if a child and family has:

- avoided chronic exposure to war and violence;
- migrated safely and felt secure in their country of first asylum;
- had access to basic necessities (shelter, food, water, employment, education and medical care);
- maintained their cultural and spiritual values and practices;
- obtained secure immigration status upon arrival; and
- developed or maintained a strong support network.



The Refugee Experience



Each refugee family's journey is unique. Some families remain intact, while others separate by choice (e.g., grandparents decide to stay behind). Meanwhile, others are forced to separate by circumstance (e.g., a family member is imprisoned). Families are often grieving because relatives or close friends have gone missing or been killed by war. The family's home and all that once seemed so secure has disappeared. They often hope to return, but may never be able to.

For just a moment, imagine that...

You must flee your home and everything familiar.

The decision to flee your country isn't taken lightly. You'll need access to enough money to pay for the journey (e.g., by boat). You may need to leave secretly, in case authorities forbid it. Perhaps you (or a family member) have been persecuted or involved in resisting an oppressive regime and find it difficult to trust anyone.

Your survival depends on total secrecy, since you might be imprisoned and tortured or killed. In a country at war, there is no simple way to know if a missing family member is alive or dead, or whether they are suffering horrific abuses. The uncertainty is agonizing.

The journey may be long and dangerous.

You know you need to leave for your family's safety, but the process of escaping is likely to be dangerous and grueling. The refugee journey often demands basic survival skills. Many people become sick from the lack of food and shelter. You may have great difficulty protecting your children as you travel.

You arrive in a country of asylum, but the hardship is far from over.

Thankfully, your family survives the journey and arrives in a country of asylum, but there are still many challenges ahead. In times of war, there are often huge migrations. This means that your family must share limited food and shelter with others, and conditions may be unsanitary, possibly even causing long-term illness or disease. You may not be permitted to leave the camp to seek work or to attend school.

You may also be required to take on new and overwhelming family responsibilities. If you're a mother, you may assume the role of protector and provider while a father or older siblings do more care giving. Or, if you've had other family members or paid help to share responsibilities in the past, you may find yourself solely responsible for your children for the first time.

There may also be a great deal of hostility towards the influx of refugees and pressure to leave the country of asylum.

The wait is long and hard.

You and your family may remain in the camp for many years, hoping all the while that you can return to your homeland. During this time, new children may be born. Infant health and overall development could be affected by conditions in the camp, as they grow up knowing no other way of life.



Your family's future is uncertain as you await your fate, not knowing which country, if any, will accept you.

Finally, you arrive in Canada—but the uncertainty continues.

Perhaps your family arrives in Canada as refugee claimants. You are allowed temporary asylum but may not be permitted to remain here. You will need to go through various hearings to determine if your claim will be recognized and if you can become permanent residents.

You may be required to remain in temporary housing until you get to your final destination (e.g., arriving in Toronto and eventually going on to Peterborough). Where you will end up might not be your choice. Your final destination could be determined by the Canadian government, and even once you arrive in your new city, you may be placed in temporary housing until permanent housing can be found.

You'd hoped that once you arrived, things would settle down, but your life and the lives of your children continue to be filled with upheaval and change.



Developmental Effects of Trauma and Resettlement

What we sometimes think of as misbehaviour in our programs is actually stress behaviour. In these moments, it's not that the child won't behave, it's that they can't.

In the past, it was believed that young children were less affected by the stress and trauma of their refugee experience than their parents. Research on the effects of trauma experienced by young children during forced migration is limited. That said, we do know that—at a time when their brains, language skills and sense of self are in critical stages of development—refugee children often find themselves in complex situations of extreme stress and adversity that they simply haven't developed the coping skills to handle.

Traumatized children display “stress behaviour.”

We also know that trauma is experienced by the mind (thoughts and perceptions of emotions), and the body (emotions and physiology) and that the experience differs by

age group. As mammals, we have built-in responses to protect and defend ourselves against threats of bodily harm or death.

There are four possible ways that the body will respond to a threat—whether it is real or perceived:

1. Fight: displaying physical or verbal aggression or dominance (not complying, arguing)
2. Flight: running, hiding, bolting away
3. Freeze: remaining still and/or rigid, preparing to fight or flee
4. Shut down: collapsing, fainting, having seizures, being non-responsive, retreating inwardly

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It's important to remember that these responses are not choices. These are our natural defense mechanisms for survival. It is very difficult to consciously control or change them. What we sometimes think of as misbehaviour in our programs is actually stress behaviour. In these moments, it's not that the child won't behave, it's that they can't.

Trauma can affect all areas of development.

For children, trauma and stress can create challenges in all areas of development:

- **Physical** (frequent illness and weak immune system, difficulties with sleeping and/or eating, toileting, headaches, seizures, fainting, regulation of arousal levels, blood pressure and heart rate)
- **Emotional** (fear and nervousness, unpredictable emotions)
- **Cognitive** (developmental delay or regression, speech problems)
- **Behavioural** (crying, increased aggressive behaviour, bedwetting, hyperactivity)
- **Social** (withdrawal, difficulty trusting others, insecure attachment, disinterest in others)

Trauma Is Experienced Differently Depending on the Child's Age

Children of different ages are impacted differently by trauma. The way trauma is expressed also differs for each child within the context of their family and culture.

Prenatal/Infant/Toddler

Children born during war or migration may have long-lasting changes in physical, developmental, psychological and cognitive processes.

Studies show that infants sense and respond to their parents' stress. As toddlers, children need peaceful, in-control, reliably responsive family members who can protect them, respond quickly to their needs and talk/play with them.

Trauma often weakens the family's awareness and responsiveness to their young children. When young children's needs go unmet or are only met intermittently, they don't understand that the parent does not intend to make them suffer. The child only knows that they are suffering and that the parent is not relieving their distress. In this way, infants and toddlers sometimes experience both physical trauma and attachment trauma when parents are unable to meet their needs for food, protection and comfort.



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For example, parents may have been unable to respond to their infant's cries as readily while journeying to safety. As a result, while in your program, the infant's cries may escalate quickly as they try to get their needs met or—in the worst cases—the child may no longer cry at all because they've learned that it doesn't get them the help they need.

Another example might be a toddler who is not yet walking because their environment has been unsafe and they were carried continually for long periods. Self-help skills, speech and toileting might also be delayed if the toddler has had inconsistent access to basic necessities like diapers, toilets, responsive adults and meaningful interactions.

You might notice that refugee infants and toddlers seem to:

- have lower birth weight;
- be more difficult to soothe or calm when upset;
- be more prone to illness, digestive and upper-respiratory difficulties;
- have difficulty developing trusting relationships and forming secure attachments;
- have difficulty sleeping;
- be sensitive to touch or easily startled and frightened by loud noises and unfamiliar sensory experiences;
- be unresponsive, lack interest, curiosity and focus; and/or
- have delayed developmental milestones.



Preschool-age Children (2–4 years)

Preschool-age children are usually in the process of learning:

- to separate themselves from primary caregivers and develop trust in others, to ask for and accept comfort and assistance;
- self-awareness and self-control, to regulate emotions and bodily functions;
- language skills, helping them to communicate their needs and better understand their experiences;
- social skills, the ability to work cooperatively with others and to be caring and empathetic;
- problem-solving skills;
- to distinguish fantasy from reality.

During this time of development, children need consistent, caring adults who listen to and speak with them. They also need opportunities for safe play and reliable, empathetic parents to comfort them. If a preschool-age child has experienced trauma during this time in their development, you might notice:

- regression and/or changes in eating habits, toileting, sleeping patterns, behaviour, and/or development;
- a focus on ensuring basic needs are met rather than engaging in play, socializing and learning;
- strong emotional responses and behaviours (sadness, mood swings, nervousness, hyperactivity, impulsivity, withdrawal, tension, aggression, crying, screaming, shaking);
- changes in arousal levels (either too much energy/agitation/defiance/aggression, or not enough energy/lack of focus/detachment/daydreaming, or rapid swings between the two);
- difficulty trusting others and seeking and accepting comfort and assistance;
- re-enactment of traumatic experiences, violent and war-related play, repetitive play and/or hoarding toys;

Implicit Memory

Traumatic memories for young children can be implicit (not remembered consciously).

A traumatic response or reaction may be triggered by environmental or sensory cues without the child having any conscious memory of the traumatic event. For example, you might have a toddler who has no memory of war, air raids and bombings, but who has a strong fear response to loud noises and/or sudden movements. Fire drills, the noise of road repairs or the sound of an airplane overhead might trigger a fear response.

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- bodily expressions of distress (vomiting, wetting themselves, headaches and stomach aches);
- difficulties with sleep/nightmares;
- differences in comfort-seeking behaviour (too clingy or failing to seek comfort and instead demonstrating behaviour such as rocking, moaning, chewing, sucking, rapidly falling asleep);
- sensory processing and integration problems (hypersensitive and aware, covering ears in noisy environments, banging into walls/people, seeming overwhelmed or shutting down);
- they seem unable to engage in play or are uninterested in peers because of their trauma or because the child may have had little social contact with other children (how to enter into play, take turns, share space and toys, tidying up and routines are often new to them);
- speech difficulties (language switching, language suppression, selectively mute). Note: children often go through a period of not using either their home language or their new language. Their fluency in their home language may also regress as they begin to learn a new language. Usually this is temporary.



Preschoolers are learning to control their behaviour and emotions. During forced migration, emotional control may be expected at a very early age. Many children have had to suppress emotions and control their anger and feelings of distress. Emotional expression may have been discouraged and cries rejected, putting the child at risk for attachment difficulties, isolation and feelings of disconnection.

For example, a preschooler might be withdrawn, or become overly attached to one educator/caregiver. They may be unable to leave the educator/caregiver's side and have trouble engaging in play with other children. An older preschooler might find it hard to settle if their younger sibling, who they are used to being with and caring for, is in another room.

School-age Children

Some families with young children also have school-age children who are struggling with:

- challenges that come from having no previous experience in school or interrupted schooling;
- a lack of familiarity with the education system;
- language barriers;
- separation anxiety when separated from parents and/or siblings for the first time;
- difficulty concentrating and trusting others;

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- long-term excessive anxiety, depression, anger and/or aggression;
- feeling withdrawn and disconnected, unable to engage in play and learning;
- rejection of or hiding their language/culture to fit in and to avoid shame, bullying;
- nightmares and/or constant re-enactment of traumatic events (for example, a school-age child might re-enact the beheading they witnessed);
- trouble sharing space with other children, hoarding food, toys, taking things from others or trying to take things home to their families;
- trouble seeking help when needed;
- inappropriate reactions (for example, giddy laughter when hurt).

School-age children are three times more likely to have Post Traumatic Stress Disorder (PTSD) than adolescents² and are frequently misdiagnosed with a developmental delay, Attention Deficit Hyperactivity Disorder (ADHD) or Autism Spectrum Disorder (ASD).

For example, a school-age child who is placed in a class based on their age after years of disrupted schooling might feel angry, depressed and/or hopeless. With the added challenge of learning a new language, it can be difficult for them to seek help as needed and to make friends.

Impact on the Family

Trauma can strengthen or weaken family bonds.

The family's level of stress and their ability to cope with it directly affects children (and the younger the child, the stronger the influence). If the family relationships were strong before the trauma and the family remains supportive and reliable, the child will be more likely to recover quickly—even if the trauma is severe. Surviving trauma together can strengthen the family bonds of mutual reliance.

However, if the family relationships were weak before the trauma, the family may have difficulty knowing how to get support from each other. This can easily weaken the family bonds even more.

² War Trauma in Refugees, Here to Help, Claudia María Vargas, PhD, 2007.

Post-Traumatic Stress Disorder (PTSD) is a mental health condition that needs to be diagnosed by a medical doctor or a psychologist. It can result from experiencing a threat of death, from experiencing a serious injury or from witnessing or learning of the death or threat of death of a loved one—especially an attachment figure.

For more information on warning signs, see [National Centre for PTSD](#) or visit www.mascanada.ca/supporting-refugees/

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Roles may need to be re-defined.

If there is a reunion of family members after a long period of absence it can be challenging for families to redefine roles, renew attachments and learn new ways of coping with daily challenges. Long-lasting severe family tension may be seen through increasing irritability, jealousy, distrust, less positive communication or little communication at all.

In many families, older siblings care for younger ones. When this has been the custom before the trauma, it is usually a protective factor that helps the child have their needs met by more people. Usually older children feel proud of their skills and connected to their sibling as well as their parents. In some cases, however, this is a new role thrust on a child who is unprepared for the responsibility. It may have been necessary for survival during traumatic events, but parents sometimes have difficulty reconnecting with the child, and older siblings can sometimes feel resentful.

Survival fatigue can cause parents to be stressed and unresponsive.

Being in a new land helps families to feel safer, but this safety comes at a cost. Exhausted and stressed, they can be easily overwhelmed by all they have survived.

Refugee parents may be “overly alert” to potential dangers, especially those affecting their child. This is often accompanied by distrust of others. They may have extreme anxiety, including difficulty eating and sleeping. They may also have nightmares, reliving past traumas. This may cause other difficulties (e.g., poor health, irritability, difficulty focusing, intense exhaustion).

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They may “shut down” and be unresponsive. It then becomes difficult for them to help their child feel secure. They may also feel isolated and insecure, and avoid contact with others. If parents become depressed and lack motivation it can cause them to be less responsive to their child. This detachment may last for some time. Without emotional support, the parent’s settlement and mental health will be in jeopardy.

Some parents might be forced to postpone some aspects of grieving—either because they are in a life-threatening situation or because they are putting their own pain aside to be strong for other family members. If there is at least one strong and reliable family member, this can help those having more difficulty.

Each family member reacts differently to grief and trauma.

There are also many refugee parents who are extremely focused on and attentive to the needs of their children. For these families, setting their children up for success in school and life is their top priority and the mission that drives them.

Each family member reacts differently to traumatic situations and the grief that comes from losing their family, home, friends, community and country.

It takes time to heal and reconnect.

The family needs time and a safe space to grieve their losses and to adapt to the many changes they’re facing.





Key Strategies to Strengthen Resilience and Support Settlement

“Resilience needs relationships, not uncompromising independence.”

Building Resilience in Children – 20 Practical, Powerful Strategies (Backed by Science), Hey Sigmund, 2016

When parents who have experienced the trauma of forced migration bring their children to a program, the family is rarely coming to us feeling like their best and most confident selves. Parents sometimes seem exhausted, unsure, lost and grief-stricken. Their cultural identity and sense of self is often shaken. They can feel less sure of themselves and of their roles in the family and society. Everything here can seem different and overwhelming.

Early childhood educators and program staff can help to foster families’ resilience by offering them a range of support and by honouring, acknowledging and reminding them of the strength that has brought them this far in their journey.

What is Resilience?

Have you ever wondered why some children and families seem to thrive, even through very stressful situations and adversity, while others need a great deal of support to manage and recover from the same (or even smaller) challenges?

Resilience is the ability to respond to significant adversity, threat or loss in a way that allows a child and family to adapt and thrive.

It requires a balance of internal strengths and access to external resources and/or support.

• KEY STRATEGIES •

How Early Childhood Programs Can Foster Resilience in Refugee Families

Research shows that *early childhood educators and programs are uniquely positioned to support healthy child development and to strengthen the capacity for resilience and recovery* in young refugee children who have experienced trauma. To foster resilience and support the refugee families in our programs, we need to:

- create a safe space;
- build relationships and support secure attachment of the child to his/her parents;
- help children understand and manage big feelings and challenging behaviours; and
- provide opportunities for mastery and success.

War and forced migration can teach children that:

- *nowhere is safe.*
- *things can change at any time.*
- *people are capable of cruelty.*
- *they have no control, and their parents have no control.*

Playing with Rainbows: A National PLAY program for at-risk refugee children, B. Revell, YWCA



Myths and Misconceptions

Resilience is not constant or permanent. Even if a child or parent had the capacity to respond with resilience during their journey to Canada, it doesn't mean they will always be able to respond well to adversity. This also means that even children who have a difficult start may build resilience with the support of consistent, caring adults.

Resilience is not a personality trait that some people are born with (and others are lacking). Everyone has the capacity for resilience.

Creating a Safe Space

Trauma impacts a child's automatic reactions, dispositions and how they perceive and interpret the world.

To change the automatic responses that have developed during war and forced migration, children need consistent, safe and predictable experiences and spaces that directly contradict what their body has learned.

When a child or parent who has experienced trauma first comes to your program, they might feel on constant alert for danger and be quick to react to threats. Children may be too anxious or frightened to engage in play. Or, especially if it's the child's first time in a group care setting, they could be overwhelmed by the new environment and all its sights, smells, sounds, people, toys, activities, expectations, limits and rules.

It's important to make your program a safe space: a welcoming and predictable environment where families can start to feel comfortable.



Tips for Creating a Safe Space for Refugee Families

For refugee children who have experienced trauma, changes to the environment, routine or staff can be frightening. To feel safe, refugee children need:

- a safe environment,
- a predictable routine,
- a consistent caregiver,
- clear expectations, boundaries and consequences.

When working to create an environment that feels safe:

- Minimize clutter and create a welcoming entry where families can observe the program and join in at their own pace.
- Be sure to greet the family with a smile. A warm, personal greeting can help families to feel welcomed and valued, and can generally set them at ease.
- Welcome both the parent and the child, if the child is not stressed by your attention.
- Learn and use the parent's and child's names (including the correct pronunciation).

When working to achieve a predictable routine:

- Ensure a very gradual separation between the child and parent. A separation plan needs to be developed together with parents. For more information on how to ease the transition, see [A Parent's Guide to Gradual Separations](#) (listed in the Resources section).
- Use visual cues before and during transitions (i.e., visual schedule, photos, gestures).

When working to provide consistent caregivers:

- Assign one staff member to take the lead with each family. This fosters stability, relationship building and trust for the parents and children.
- Introduce the family to the caregiver who will help their child settle. Show the family the room, where their clothes are stored and the indoor and outdoor play spaces. Introduce them to the other families, helping them to make social connections.

- Welcome each family personally each day, and give them your full attention. Asking how they slept or how they are feeling helps the parent realize that you want to know them better. Daily, friendly chats of 1–2 minutes are more effective than less frequent, longer conversations.

When working to provide clear expectations, boundaries and consequences:

- Guide the child through the daily routine, introduce them to activities and expectations, support their interactions with the other children, consistently re-direct behaviour that is harmful, respond calmly to emotional upset, and generally help the child to understand realistic boundaries and consequences.

Things to avoid:

- Having too many staff members help settle the child.
- Too many toys, transitions and/or long wait times.
- Overwhelming the family with a lot of information.
- Making judgements. Check your biases.
- Using children as translators for the parents.
- Responding emotionally to behaviour that challenges you. If you can't respond in a calm, unemotional way, step away if possible.
- Using different words to describe the same thing (e.g., toilet, bathroom or washroom). Pick one word and use it consistently.
- Playing music all day long. Play only soothing music for a limited amount of time (10–15 minutes) each day. Too much background noise increases stress levels, which can make children irritable. It also makes it hard for them to hear and understand things being said to them when they are learning the new language.
- Trauma reminders/triggers. Think about your program and whether there might be any triggers that you need to plan ahead for. This might include toys with loud, sharp bursts of noise; lights that flicker; loud commanding voices or school bells and fire drills. Consider how you might be able to avoid the trigger or to support the child and family when the trigger happens.

Building Relationships and Supporting Secure Attachment

Studies show that supportive relationships are one of the most important protective factors in helping children who have been exposed to trauma.

Some refugee children might be coming out of a period where their parents were struggling to meet basic needs and protect the family from harm. For this reason, it's important not only to build a supportive relationship with the child, but also to recognize that parents are the child's primary source of comfort and security and to support the relationship between parent and child. When you communicate effectively with parents and develop a relationship, it will allow you to support the whole family.

Communication

When it comes to building supportive relationships, communication is key. There is so much to learn upon arriving in Canada, and you are only one of many people giving the family important information. Respect the effort needed for a family to communicate with you, and keep in mind that their ability to listen and understand can be severely hampered by the trauma they have suffered and by their lack of understanding of the new language. Even if you are speaking to them in their home language, they may have difficulty processing information because, in addition to hindering communication, trauma also reduces a person's ability to absorb new information.

If others in your organization (settlement worker or coordinator) have already been working with the family, if possible, speak with them to see if they have any information that would help you to better support the family. They might also be able to help you provide important information to the parent.

Next, identify strategies for communicating (e.g., reducing language and using more props, pictures and gestures; learning a few important words in the family's home language; using a translator). If possible, provide information and materials that are translated and/or written in simple English or with visuals. If there are literacy challenges, do your best to provide verbal or visual explanations.

Understanding Gestures and Body Language

Remember that gestures and body language are often culturally determined. Every language and culture has expectations for emotional expressiveness, politeness, respect and humour. The new culture may expect children to answer openly when asked a question or to look an adult in the eye when they are being chastised. This can be very challenging for children who have been encouraged to behave more passively and it can be easy to misinterpret what a child is feeling or trying to express.

• KEY STRATEGIES •

To help build a relationship, you can ask about their children’s likes and dislikes. “What does Marwan like to play with at home?” is a good opener, and you can follow up by giving a few choices to help English language learners (e.g., Toy cars? Dolls?). Keep in mind, however, that if there’s too much talking, families stop listening and stop trying to understand. Families may even avoid being with you because it causes them stress when they don’t understand.

Here are some things you can do to communicate more effectively with parents:

- Give them your full attention. Stand face-to-face so they can see any gestures or facial expressions.
- Echo back what you think they’ve told you (e.g., “You aren’t coming tomorrow, right?”)
- Match your communication style to theirs to increase their comfort level. Consider how physically close or distant you are, the volume of your voice, and the length of pauses between when they speak and you speak.
- Speak more slowly. Longer pauses allow parents more time to process your words and meaning.
- Discuss only one idea at a time. “How many hours did Zarlashite sleep?” while pointing at your watch vs. “When did she wake up and when did she go to sleep?” or “Zarlashite needs to get at least eight hours sleep in order to do well at school.”)
- Simplify your speech (e.g., “Can you come here tomorrow?” vs. “It is important to come to the program regularly.”)
- Be careful to avoid information overload. Tell parents only what they need to know. Remember that any major changes are often best achieved through baby steps!
- Understand that sometimes families who have been traumatized have unusual reactions (e.g., an embarrassed parent may laugh when their child is crying about separation).
- Encourage the use of the home language. Families wanting their child to succeed may have stopped using their home language at home. This often leaves the child feeling even more disconnected from their family. With less communication or strained communication, tension and misunderstandings can easily build.



Consider Parents’ Priorities

Check in with yourself when you’re providing information and services. Consider whether your agenda and goals are meeting the priority needs of the parents and children at that time. For example, if you’re offering a positive parenting program to a parent with six children, but the family doesn’t have consistent access to enough food or permanent housing, positive parenting might not be their top

• KEY STRATEGIES •

priority in that moment. They might need help finding housing, work and community programs instead.

Also, be sensitive about asking parents to bring food or extra things for their child. They may not have the money to do so or may not know what to buy or where to buy it. Think about adapting what you're serving rather than asking parents to bring food.

Supporting a Family's Connection with their Child

When parents feel confident and supported, they are more likely to be able to support their family's successful settlement. Showing the parent that you consider them the expert on their child is a great way to build trust and strengthen both your relationship with them and their relationship with their child.

Ask parents for suggestions and follow up on them to help parents feel valued and respected (e.g., "How do you help Laila go to sleep?") Try to find moments when you can reinforce the parents' position with the child and build their confidence. For example, if you see a mother having trouble getting her child to put their coat on, rather than stepping in as an authority figure to help, think about how you can best support the parent in their role and position. You might ask the mother if you can help, and then say to the child, "Did you hear mama? She said put on your coat." as you help slip on the coat and zip up the zipper.

When they are able, encourage parents to notice their child's cues, provide emotional support and spend quality time with their children. Help them to understand how their relationship with their child promotes self-esteem, self-confidence and development. Genuinely praise families for their positive parenting, (e.g., Ahmed is so lucky you're his mother. You are so gentle with him.) and have a consistent caregiver tell them about their child's progress, (e.g., Soraya let me play with her a bit today.) This will help them to focus on their child's strengths.

If a parent does something that makes you uncomfortable, consider whether what they're doing might be a parenting practice from back home. If it is, before stepping in, consider why they might have done it that way. Are there any benefits? There are many different practices from around the world that are very effective! Obviously if it is hurting the child or having a negative impact on others, you need to step in, but there are times when it might be appropriate for you to step back and learn a different approach.

Religious beliefs and strong faith can help families to overcome trauma and to feel more positive and hopeful.

Make efforts to respect and support religious practices in your program when possible.

For example: Provide families with a space to pray. Ask them about food restrictions and their children's rituals around meals and sleep times.

• KEY STRATEGIES •

Finally, remember that parents are often receiving advice from many other people and are always doing the best they can with the information, resources, time and energy they have at any given moment. If they're having a bad day, provide support rather than judgement.

You can also remind and reassure parents that:

- Regression is perfectly normal and temporary. It's okay if their child regresses back to wearing diapers or wetting the bed. They have been through stress and trauma.
- Behaviour is a symptom of what is going on in a child's brain. Their children aren't choosing to behave in challenging ways. It takes time to develop new patterns of behaviour and to change the way the brain is processing things when they first arrive here in Canada.
- Keeping the home language reduces stress; strengthens emotional connection to family; improves a child's focus; allows for authentic, meaningful communication; lets children express needs more easily so that parents can better respond to them; and fosters self-identification and pride. There are also academic and social advantages to bilingualism.
- It's normal for children to go through a silent stage when they're learning more than one language. During the silent phase, children are observing, listening and processing—and when they do start talking, they often have a surprising number of words! If you become familiar with the stages of language development for dual-language learners (DLLs), you will be better able to reassure parents and guide them in supporting their child. [Teaching at the Beginning](#) has a wonderful series of videos that document the stages of language development for DLLs that you might find helpful.

Children do best when:

- *They feel important and loved.*
- *They feel understood, accepted and supported.*
- *They are protected from harm.*
- *Their basic needs are being met.*

[Building Resilience in Young Children, Best Start, 2012.](#)

Ensure a gradual separation between parent and child.

Gradual separation means increasing the length of separations between the parent and child as the child becomes more comfortable in the program. It is especially important for families who have experienced trauma, and involves working with parents and children for their first separations ahead of time.

Gradual separation:

- respects the needs of children and parents,
- helps children and parents feel safer,
- supports a smooth transition into your program, and
- sets the stage for successful separations and healthy attachment as the child grows.

• KEY STRATEGIES •

Children who have experienced severe trauma often have extreme separation anxiety. Each child is different, but it's important not to rush the process. Separations can take weeks, and if done too quickly can result in more trauma, anxiety and difficulty developing trust, as well as delayed settlement and learning of the new language.

Here are some ways that the staff member who has been assigned to take the lead with the family can help to make the first separation easier:

- Welcome the new parent and give them time to settle in.
- Be respectful and positive about the attachment of the child to the parent and, if appropriate, ask about the child's previous experiences of being separated from the parent/family.
- Explain gradual separation using an interpreter or written translations that you review with the parent.
- Play beside—and eventually with—the parent and child. It can help to use toys that pop-up or hide and to practise saying bye/hi.
- Gradually come closer to the child but not between the parent and child, according to the child's readiness.
- Ask the parent to become gradually less involved and to very gradually move a little farther away from their child.
- Try the first separation when the child can play without seeking their parent for at least 5 minutes. Encourage parents to say a quick, warm goodbye with the promise to return.
- Encourage the parent to be confident (i.e., not to wait for the child to give permission for them to leave).

For more information on gradual separation, and multilingual information for parents, see [A Parent's Guide to Gradual Separation](#).

Reactions to rushed first separations might include screaming, vomiting, kicking, aggression, trying to escape, rigidity, severe withdrawal (or “shutting down”), regression, trouble eating/sleeping and/or severe anxiety. Alternatively, a child may suppress their feelings. Rather than crying, they may simply seem unfocused, unresponsive or have a rigid posture.

Tips for Building Relationships with Refugee Children in your Program

Developing relationships and trust with the refugee children in your care is key to supporting their resilience and overall settlement.

Dr. Jean Clinton is a leading expert on Infant Mental Health. She once said that “every child in your program should have someone whose face lights up the moment they walk into the room.” This should be true of every child you work with—not just those who are easy to get along with, but also those who challenge you. Never underestimate the power of caring!

The children in your care will feel secure and accepted when you:

- Provide gentle and consistent guidance.** Provide clear boundaries/limits. Once the child understands the limits, balance correction with praise, redirect, and deliver consequences without negative emotions.
- Provide calm, consistent and soothing care when the child needs comfort or is hurt, frightened, sad or angry.** Acknowledge the child’s feelings in ways they can understand. Let them know they’re not alone with their big feelings and support them in developing healthy ways to soothe and calm themselves. This creates a sense of trust and security. It also helps them to feel closer to you and to learn healthy ways to soothe and calm themselves and others as they get older.
- Be respectful, be sensitive and adjust your approach and expectations for each individual child.** Don’t expect children to want to jump right into play. Be sensitive to each child’s needs. If they need an adult, try to stay close-by. If they need space to observe, give them space to do that.
- Keep in mind that children may be sensitive to touch.** Don’t approach the child from behind and touch them on the back. Instead, approach them from where they can see you.
- Carefully observe and get to know the child.** Which toys or activities seem to interest them most? When do they seem most comfortable? Play beside or with the child and offer attention and affection when they are ready. Learn to recognize signs of distress. If possible, learn a simple comfort phrase in the child’s home language and use it. For example, “Mommy’s coming back soon.”

• KEY STRATEGIES •

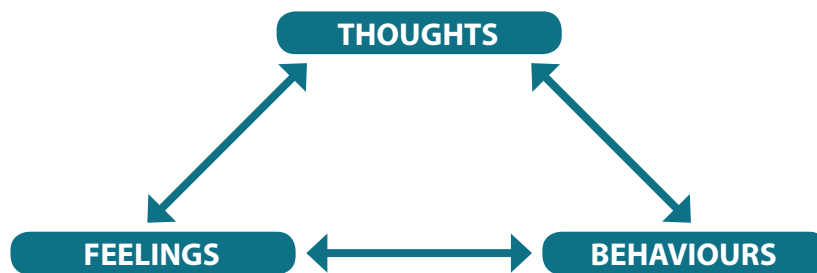
- ❑ **Reinforce and respond to cues.** Look for signs that might indicate the child needs a quiet space to retreat to or an opportunity for active play. You can then provide alternative activities to avoid upset and disruptive behaviours.
- ❑ **Provide comfort.** If the child is upset, be there for them. Let them know that you're aware of their distress and respond to it appropriately by providing comfort if the child will allow it. If the child will not accept comfort, be respectful of that. Back away and try to offer reassurance from a distance. Invite the parent to bring in a comfort object (e.g., a blanket or toy) or a familiar object such as a scarf. The child can hold this item when the parent is away and it may help them to feel more secure.
- ❑ **Be calm, reliable and consistent.** It's important for children who have experienced trauma to have a calm, reliable, consistent caregiver. If staff take turns settling a child, it is likely to be more difficult and to cause the child more anxiety. This is especially true for infants and toddlers.
- ❑ **Listen carefully and with interest**—even if the child is speaking another language. Try to respond in genuinely encouraging and positive ways, and learn the phrase “show me” in the home language. This lets the child know that you think what they have to say is important, even if you don't understand yet.
- ❑ **Minimize the use of language** when the child first arrives, unless you speak the child's home language or the child understands some English. Use simple sounds and gestures to offer comfort. Do not ask too many questions and avoid unnecessary questions about potentially sensitive topics.
- ❑ **Help children safely express, identify/label feelings** (glad, sad, mad, scared, etc.). Learn some of these words in the home language and pair them with English/French. Point out that other people have these feelings too. Read or tell children stories about people who show empathy, compassion, kindness and understanding for others. (See the Resources section for a list of suggested books and activity ideas.)

Our goal is to help refugee children attain and maintain a state of alert calm that allows them to engage in play and learning.

Helping Children Understand and Manage Big Feelings and Challenging Behaviours

Our thoughts directly affect how we feel, and how we feel directly affects our behaviour. Every refugee child will enter your program with different experiences, thoughts, feelings and behaviours. Some children may have been sheltered from most of the stress of forced migration, while others may be working through overwhelming experiences and emotions that can be easily triggered. Trauma can also derail development and make it difficult for children to learn to identify, express and manage feelings.

Usually, babies learn to regulate and tolerate their shifting feelings through interaction with a responsive and caring adult. If a child went through this developmental stage in an unsafe environment and/or with adults who were unresponsive to them, they may still seem less emotionally mature. Our goal is to help refugee children attain and maintain a state of alert calm that allows them to engage in play and learning.



Refugee children who have experienced trauma may find it hard to:

- See connections between feelings, thoughts and behaviours.
- Understand and express emotions.
- Accurately read other people's emotional cues.
- Control their reactions to threats and/or trauma reminders.³

This might mean that the child seems aggressive and disruptive (e.g., hitting others or throwing toys) or passive and unable to initiate play. Some children may even seem to settle easily at first but later start to display signs of trauma.

Some behaviours might have been effective for survival in other situations, but are no longer appropriate or acceptable. Aggressive behaviour may have been encouraged as a means of

³ Caring for Children Who Have Experienced Trauma, National Child Traumatic Stress Network, 2010.

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survival during forced migration, and children may have been encouraged to run when they felt in danger. Once children start to feel safer, they might seem giddy or very active. Children may also struggle with expectations in the child care setting that are very different from what is expected at home.

You may find that some refugee children “act out” as a way of:

- dealing with tremendous change and loss;
- re-enacting violence witnessed in a refugee camp while fleeing or during a war, or imitating behaviour seen in older siblings;
- venting frustration, anger or anxiety—especially if they are feeling misunderstood or there is a language barrier that keeps them from expressing themselves verbally;
- expressing upset, anxiety and/or panic;
- reacting to a parent’s mood or to a tense situation at home;
- protecting themselves;
- expressing separation anxiety.

It can be challenging to find the appropriate response to support refugee children when their experiences, feelings and behaviours fall outside of what we are used to and comfortable with, but it’s important to remember that behaviour is one of the many ways that children can communicate their needs.

No matter what behaviour the child is displaying, what you see is just the “tip of the iceberg” for children who have been through trauma. Below the surface are the feelings, thoughts, expectations and beliefs that the children have accumulated as a result of their traumatic experiences.⁴

Aggressive behaviour may have been encouraged as a means of survival during forced migration, and children may have been encouraged to run when they felt in danger.



⁴ Parent Workshop: Facilitator’s Guide, National Child Traumatic Stress Network, 2010.

• KEY STRATEGIES •

When children are calmly focused and alert, they are best able to modulate their emotions; pay attention; ignore distractions; control their impulses; assess the consequences of an action; understand what others are thinking and feeling, and the effects of their own behaviours; or feel empathy for others.

*Calm, Alert and Happy,
Dr. Stuart Shanker, 2013*

Even a child who seems passive and observant can be struggling with intense emotions. Our role as educators and caregivers is to provide children with the support and skills they need to manage feelings in a way that keeps everyone in our programs emotionally and physically safe.

We can do this by:

- being non-judgemental, compassionate and caring;
- creating a plan for how to prevent and handle behaviours;
- shadowing and observing all new children;
- learning to anticipate a child's needs and avoid triggers;
- making changes to the environment and routine;
- adjusting our expectations and responses;
- providing opportunities for children to express their feelings;
- teaching children how to calm themselves down when they feel upset.

For more information on what to do when behaviour is challenging, refer to the [Challenging Behaviours Tutorial](#), the [Guiding Refugee Children's Behaviour](#) and [Helping Refugee Children Cope with Stress](#) tipsheets.



Responding to a Child's or Parent's Traumatic Memory

It can be difficult to know how to respond when a child or parent brings up a traumatic experience, or how to support refugee children who have behaviours and emotions that challenge our usual ways of responding.

In these moments, it's important to:

- Avoid responding with strong emotions.
- Pause and think about how you can respond genuinely and compassionately.
- Acknowledge, affirm and accept the parent or child's emotions.
- Remind the parent or child that they are safe now and, if appropriate, that they are not to blame for what happened.
- Try to reframe negative thinking patterns and/or errors in the child's perception. You might need to clarify facts with parents. Remind them that the child needs to express themselves and be heard. The parent may think it would be better for the child to just forget about it. It is okay to listen and not try to fix things. Just be there.
- Redirect the child to an activity that allows them to either express their emotions (i.e., creative, sensory or physical) or move past the trigger, thought, action or emotion.

For example, if a child puts a dolly on the floor, lowers their head and says: "dead baby," you might respond by saying, "It looks like you feel sad when you think about that. But it is safe here, and this is just a dolly that we can pretend to feed and cuddle and take care of." Alternatively, if the child has limited English, you could use body language and simple terms like "sad," "safe now," and "dolly" to communicate the same message. Watch for cues to determine whether the child might like to talk about it, or whether they are ready to move on to pretend play like taking care of the dolly or to choosing another activity.

Tips for Helping Refugee Children Understand and Manage Big Feelings and Challenging Behaviours

When young children have empathetic, consistent, reliable supportive adults in their lives, they are more likely to learn how to self-soothe in stressful situations. By helping children understand and manage their feelings and behaviours, we can support their development, settlement, healing and resilience.

For preschool children, it's important to:

- Talk about feelings. Let children know it's okay to have strong feelings, but not okay to hurt others.
- Tune in to children's emotions. Notice when they're struggling with big feelings (anxiety, sadness, anger) and behaviours, and encourage positive emotional expression.
- Acknowledge and validate emotions. Label feelings and provide visual tools to help children identify and communicate emotions. You can use a feelings chart (full link in the Resources section), feelings charades, puppets and story books and/or labeled pictures of children experiencing different emotions.
- Even if children don't yet have the language, using a program like Zones of Regulation (full link in the Resources section), and associated visuals can help children express how they feel.
- Tell children that you are there to help them calm their strong feelings if they need you.
- Practise self-soothing and calming exercises like deep breathing, imagining something soothing, listening to a quiet song, blowing bubbles or children's yoga. By teaching refugee children how to self-soothe, we can help them to regulate their emotions in order to attain/maintain a state of alert calm that will allow them to engage in play and learning.
- Incorporate physical activity into your program daily. It reduces stress and helps children to manage emotions and energy.
- Provide opportunities to express emotions through art and sensory play (e.g., using paint, crayons, pencils, paper, clay, play dough, sand). (See list of Programming and Activity Ideas in the Resources section.)
- Enhance the sensory materials in your environment. Use a variety of textures in all areas. Have a small pillow or soft blanket available for when children need a break.

• KEY STRATEGIES •

- Read or tell children stories about feelings and how other children manage big emotions. (See list of Children's Storybooks that Promote Resilience in the Resources section.)
- Help children understand the link between feelings, thoughts and behaviours (keeping the child's age in mind).

As an educator and caregiver:

- Be culturally sensitive and remember that each child is different. What works well in helping one child to handle intense feelings may not work for another.
- Be clear, calm, consistent, honest and genuine. Every day, we have opportunities to set a good example in how we manage our feelings. For example, if you find yourself getting upset by a child's behaviour, remember that before you can be emotionally and physically safe in managing the child you must be completely in charge of your own feelings. Take a breath and get calm before you react.
- Provide realistic and consistent limits and boundaries to help children feel safe and secure. When children feel secure, they are less likely to test limits with challenging behaviour.
- Practise lots of patience and understanding. Remember that when a child has been through trauma, sometimes their behaviour is fear/grief-based. At these times, a child who has experienced trauma CANNOT behave differently. It's not that they WON'T behave differently. They are not being stubborn. Rather, they are having a physical response to a trigger. Program staff might need to get support so that they can help the child through the challenge of managing triggers and emotions/behaviours of this kind.

For infants and toddlers, focus on consistently and reliably meeting the child's physical needs. The more you can anticipate a child's needs before they get upset, the better.

This means:

- Carefully observing and getting to know the child. Talk to the parent if possible to find out their usual routines.
- Creating a soothing environment. Loud noises can be a strong trauma reminder for babies and toddlers. Keep the environment as soothing as possible with soft lighting and calm voices.
- Taking it slow and using texture and movement to calm and soothe babies.
- Tuning in to infants' and toddlers' non-verbal signs.

• KEY STRATEGIES •

Providing Opportunities for Mastery and Success

Refugee children who have been through traumatic experiences may have learned from their past that they have no control. This may be especially true if it seemed to them as though even their parents were powerless to stop bad things from happening throughout their journey.

As a result, children might be feeling unsure of themselves and their abilities. Their sense of self, confidence and competence can be deeply affected by their experiences.

Refugee children need supportive relationships, a safe space, and opportunities to nurture and regain their confidence and competence. They need to be reminded that they can do things that are hard, overcome challenges, take age-appropriate risks and have a positive impact on outcomes.

When a child has confidence in their abilities it builds resilience.

When we have confidence in our abilities, it helps us to respond to problems with resilience. This “I can do it” attitude motivates us to keep trying even when things are difficult. If we keep trying, our efforts are more likely to pay off and we will feel a sense of accomplishment.

We start to develop confidence in our ability to make things happen very early in life. When babies cry and their parents respond, they begin to learn that they have some control over their environment. They develop a sense of security and learn to trust that their parents will take care of their needs.

As they grow, this security and trust allows children to feel safe enough to explore their environment. The enjoyment children get from exploring their world motivates them to “master” the tasks that come with their age and stage. These accomplishments help children develop confidence in their ability to handle challenges and frustrating situations throughout their lives.

Building Resilience in Young Children, Best Start, 2012

Tips for Providing Opportunities for Mastery and Success for Young Refugee Children

When we build relationships and set up our programs and environment to support refugee children’s mastery and success, their new-found confidence can lead to decreased anxiety, frustration, anger and upset, and a greater sense of control and hopefulness for the future.

It can also trigger an improved ability to learn and focus, to engage in play, to relate to others, and to generally manage feelings and behaviours. To build feelings of success and mastery in your program:

Provide children with opportunities to:

- Make choices and/or make their own decisions.
- Think and act independently.
- Exercise and participate in physical activity.
- Build self-awareness, self-confidence/self-esteem.
- Take age-appropriate risks (i.e., facing fears with support; taking baby steps).
- Express themselves through physical, creative and sensory activities.
- Play with toys that are easy to master, with little likelihood of failure (for example, puzzles designed for a younger age, toy cars or animals).

Focus on the positives.

- Genuinely acknowledge children for their accomplishments and efforts, and use positive language in your program.
- Start by asking children to demonstrate the behaviour you would like to see rather than telling them to stop what they’re doing. For example, demonstrate walking and say, “Please walk” rather than “Stop running.”

• KEY STRATEGIES •

- Emphasize similarities and celebrate differences. For example, talk about “Yoshan likes to... and Maya likes to...”
- Build on each child’s strengths.
- Let them know that you are confident in their ability to manage their feelings and behaviours.

Help them build problem-solving skills and a positive outlook.

- Help children reframe difficulty. Acknowledge setbacks, then gently redirect their attention toward next steps. For example: “Oh no. It looks like you fell when you were balancing.” You might give the child a quick hug, then move on and acknowledge what they did accomplish. “But look how far you were able to balance. You got so much farther today than yesterday!”
- Help children understand that there are people in their family and community who are there to help them, and that it’s okay to ask for help! Model the phrase “Help me” as you respond to their cues for help.
- Help them focus on what they have rather than on what they’ve lost or don’t have.
- Foster a growth mindset by creating a program culture that celebrates change and growth, acknowledging how we can all learn and get better every day.
- Don’t rush to the rescue when things don’t go as planned. Obviously, you need to step in immediately if the child is at risk of harming themselves or others, but if everyone is safe, make sure to give the child space to think through a solution when things go wrong. Then you can genuinely praise them for coming up with a solution or coach them to come up with a solution.

• KEY STRATEGIES •

Your support can make a world of difference.

Many newly arrived refugee families are managing trauma while handling a great deal of upheaval and change—and often learning a new language on top of it all! As one of their first points of contact in their new community, early childhood educators and early years programs are uniquely positioned to offer a safe, predictable environment where families can begin to heal and reconnect. Your support really can make a world of difference.

With a better understanding of the refugee experience and the possible effects of trauma, you can tailor your support and programs to be more responsive to the needs of refugee children and families. Refugees are survivors. And by building strong relationships—both with parents and children—you can help to support them and strengthen their natural capacity for resilience and recovery.

There may still be struggles ahead, but your caring, compassion and support will go a long way toward helping them build a solid foundation for successful settlement as they begin to build a new life in Canada.

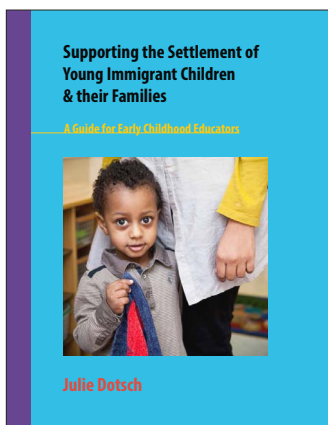




Resources

Resources for Professionals in Newcomer Child Care

cmascanada.ca shares the latest information and research to support your work with immigrant and refugee children and families.



cmascanada.ca is a comprehensive website that caters specifically to the immigrant child care community. The website is updated weekly with industry news and resources, ‘experts corner’ articles on hot topics in child care, informative videos and a variety of newcomer focused child care resources that can be downloaded free of charge.

CMAS also develops specialized training and resources that combine their expertise with the practical knowledge of other experts in the field. Important CMAS resources that can be found at cmascanada.ca include:

Supporting the Settlement of Young Immigrant Children and their Families, CMAS, 2015.

Written by child care and diversity expert Julie Dotsch, with strategies and ideas from caregivers working in the field of newcomer child care, this book builds on caregivers’ professionalism, knowledge and experience to provide a greater understanding of the new immigrant and refugee experience from a child’s and family’s perspective.

Caring for Syrian Refugee Children: A Program Guide for Welcoming Young Children and Their Families, CMAS, 2015.

Written by a team of experts in newcomer child care, this guide provides programs with knowledge and tools to better understand and respond to the unique experiences and needs of Syrian refugee children.

You can also find a comprehensive list of resources to support you in your work with refugee children and their families at cmascanada.ca/supporting-refugees/.

CMAS Resources for Newcomer Families

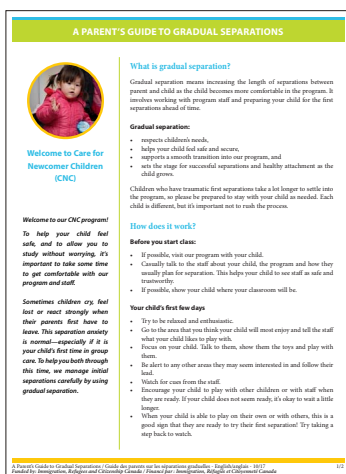
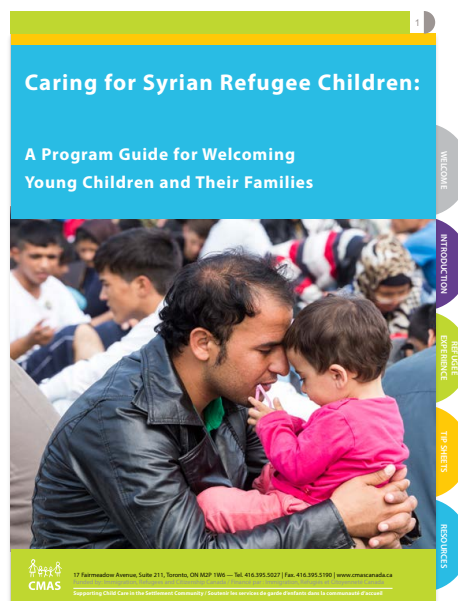
At CMAS we understand the unique needs of newcomer families and work to develop high quality resources for them that not only contain the information they need, but that speak their language—literally! Many of our parent resources are available in over 20 languages. All of these multilingual parent resources and more can be found at cmascanada.ca/cnc/parents.

All About Care for Newcomer Children (CNC), CMAS, 2017.

A resource that settlement-service-providing organizations can hand out to parents to inform them of the rules and expectations of CNC programs. It is available in over 20 languages, including Arabic, and is one of our most popular resources.

A Parent's Guide to Gradual Separation, CMAS, 2017.

This resource is available in over 20 languages. It helps parents understand how gradual separation works, what to do in the first few days and how to help if their child is upset.



• RESOURCES •



New in Canada Parenting Support Series – Brochures, CMAS 2016.

A series of multilingual newcomer-focused brochures about topics related to child safety.

Useful Resources from Other Organizations

Trauma

Helping Young Children Rebound after Traumatic Experiences, Teaching Strategies, 2005.

www2.teachingstrategies.com/content/pageDocs/Helping-Children-Rebound-PS-2012.pdf

This resource was developed to help early childhood educators support children after the trauma of natural disasters, but it is full of great information to help preschool children who are impacted by traumatic events of all kinds.

Helping Traumatized Children, The Child Trauma Academy, 2014.

childtrauma.org/wp-content/uploads/2014/01/Helping_Traumatized_Children_Caregivers_Perry1.pdf

One of the questions educators and caregivers who work with traumatized children ask most often is: Should I talk to the child about the traumatic event? In this booklet you'll find answers to this question and many more.

Invisible Wounds: The impact of six years of war on the mental health of Syria's children, Save the Children, 2017.

savethechildren.org/atf/cf/%7B9def2ebe-10ae-432c-9bd0-df91d2eba74a%7D/INVISIBLE%20WOUNDS%20FINAL%2020020317.PDF

This 25-page report documents the impact of war on children and their families and ends with recommendations for creating solutions.

National Centre for Posttraumatic Stress Disorder (PTSD)

www.ptsd.va.gov/

The National Centre for PTSD has information about childhood trauma, infant attachment and PTSD in preschool children.

National Child Traumatic Stress Network (NCTSN)

NCTSN has a Child Trauma Toolkit for educators

(wmich.edu/sites/default/files/attachments/u57/2013/child-trauma-toolkit.pdf),

a Resource Parent Workshop: Facilitator's Guide

(nctsn.org/nctsn_assets/pdfs/rpc/PC_FG_Module5.pdf),

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and a useful handbook for parents called *Caring for Children who have Experienced Trauma* (nctsn.org/nctsn_assets/pdfs/rpc/RPC_ParticipantHandbook_FINAL.pdf)

Playing with Rainbows: A National Play Program for At-Risk Refugee Children, B. Revell, The YWCA Canada, 2010.

cmascanada.ca/wp-content/uploads/2018/07/PlayingwithRainbows.pdf

This manual outlines a play-based group model designed to facilitate healing in school-age children and youth who have been traumatized by experiences of war and migration.

War Trauma in Refugees, Here to Help, Claudia María Vargas, PhD, 2007.

heretohelp.bc.ca/visions/trauma-and-victimization-vol3/war-trauma-in-refugees

This resource identifies red flags for posttraumatic stress disorder (PTSD) according to age, gender and culture.

Resilience

Building Resilience in Children — 20 Practical, Powerful Strategies (Backed by Science), Hey Sigmund, 2016.

heysigmund.com/building-resilience-children/

This article succinctly describes 20 practical and powerful strategies for promoting resilience in your program.

Building Resilience in Young Children, Best Start, 2012.

beststart.org/resources/hlthy_chld_dev/pdf/BSRC_Resilience_English_fnl.pdf

This booklet offers tips and resources to help you build children's resilience.

Harvard Centre on the Developing Child — InBrief: Resilience Series, Centre on the Developing Child, Harvard University.

developingchild.harvard.edu/resources/inbrief-resilience-series/

These three short videos provide an overview of why resilience matters, how it develops and how to strengthen it in children.

RIRO Resiliency Guidebook, Reaching In Reaching Out, 2006.

reachinginreachingout.com/documents/GUIDEBOOK-MAY29-17-FINAL2_000.pdf

This guidebook is for child-serving professionals and parents. It aims to increase awareness of the importance of promoting resilience in children through caring relationships and adult modelling of resilient thinking and coping strategies.

Ten Tips for Building Resilience in Children, American Psychological Association.

apa.org/helpcenter/resilience.aspx

Here are 10 tips for building resilience that you can review and share with parents.

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The Power of Positive Adult-Child Relationships: Connection is the Key, Jean Clinton.

edu.gov.on.ca/childcare/Clinton.pdf

In a typical day, educators and caregivers may spend the majority of their time “correcting and directing,” leaving little time for “connecting.” This article invites you to consider how to shift this balance to spend more time forming connections with the children in your care.

Programming and Activities

30 Games and Activities for Self-Regulation, The Inspired Treehouse.

theinspiredtreehouse.com/self-regulation/

These 30 games and activities support planning and problem solving, memory, attention, motor control and sequencing. They’re a great way to introduce self-regulation strategies to kids!

Calm, Alert and Happy, Government of Ontario, Dr. Stuart Shanker, 2013.

edu.gov.on.ca/childcare/Shanker.pdf

This article discusses self-regulation, the signs of an excessive stress load in children and three steps for encouraging self-regulation.

Children’s Storybooks that Promote Resilience, Reaching In Reaching Out.

reachinginreachingout.com/resources-booksKids.htm

This is a list of English and French storybooks that illustrate resilient thinking and coping in action and that promote cultural competence. Each book is annotated and categorized by the resiliency abilities it supports.

Feelings Charts, Pinterest.

pinterest.ca/explore/feelings-chart/

This link will lead you to many different examples of feelings charts to choose from.

Infographic: Understanding Stress Behaviour for Teachers, Mehrit Centre.

self-reg.ca/infographic-understanding-stress-behaviour-for-teachers/

This infographic will help you to understand the difference between misbehaviour and stress behaviour.

Resource Parent Workshop: Facilitator Guide, Module 5: Dealing with Feelings and Behaviours, The National Child Traumatic Stress Network, 2010.

nctsn.org/nctsn_assets/pdfs/rpc/RPC_FG_Module5.pdf

This workshop introduces participants to the Cognitive Triangle and the impact of trauma on children’s thoughts, feelings and behaviours. It also introduces techniques for helping traumatized children understand and control their emotional and behavioural reactions.

Teaching at the Beginning

youtube.com/watch?v=H763M_pOITE

This YouTube channel showcases dual language learners who are acquiring English.

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Zones of Regulation

zonesofregulation.com/index.html

This website offers live webinars and access to training that provides a framework to foster self-regulation and emotional control.

Other Organizations of Interest

Canadian Centre for Victims of Torture

ccvt.org/

CCVT is a non-profit, registered charitable organization that helps survivors to overcome the lasting effects of torture and war.

New Beginnings Clinic: CAMH Services for Refugees

camh.ca

CAMH's New Beginnings Clinic provides psychiatric consultation and possible brief culturally sensitive interventions to newly arrived refugees, as well as case consultation for care providers.

• PROJECT TEAM •

Susan Hoo, CMAS Manager

Susan has been at the helm of CMAS since 2001, leading a team of dedicated professionals who help programs to deliver safe, quality, newcomer-focused childcare. Her passion for developing solutions that lead to positive change and enhance family life is evident in all that she does, and she draws from over 25 years of experience designing, implementing and managing projects for the non-profit community.

Tricia Doyle, CMAS Assistant Manager

Tricia has over 25 years of experience in childcare. Having worked as an early childhood educator, she knows first-hand how working to create safe, welcoming environments is key to quality childcare. At CMAS, she manages projects and oversees the development of supports that help to empower childcare staff to take the lead in building strong, stable early childcare communities and quality programming for newcomer families.

Heather Savazzi, Author, CMAS Content Development Team Lead

Heather simplifies the complex, shares stories, learns and collaborates with others to create positive change. With 20 years of experience supporting diverse groups of children and families, she expertly designs and delivers customized training and resources to support early learning and childcare communities in their important work with immigrant and refugee families.

Anna Humphrey, Editor

Anna has a passion for putting things plainly. Whether she's editing resources for English language learners, creating easy-to-read website text for busy professionals, or writing medical brochures that demystify doctor-speak, Anna has built her career on putting readers' needs first and communicating clearly. She is also the author of five fiction books for young readers, including the *Clara Humble* series from OwlKids Books and the *Megabat* series from Tundra Books.

Kristina Gougeon, Graphic Designer

Drawing on over 20 years of writing, design, interactive development, education and research experience, Kristina develops and manages content for e-learning courses, as well as marketing and communications materials across all media. In partnership with clients that range from not-for-profit and government agencies to technology, healthcare and insurance organizations, Kristina transforms information into meaningful user experiences.



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Supporting Child Care in the Settlement Community / Soutenir les services de garde d'enfants dans la communauté d'accueil



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