

Center for Family Development

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Assessing Children with Complex Trauma and Attachment Disorders **Arthur Becker-Weidman, Ph.D.**

This two-DVD set (approximately three hours) explains how to assess Children for Complex Trauma and disorders of Attachment.

Children with early chronic histories of maltreatment may develop impairments in a variety of domains. The seven domains of impairment include:

- Attachment
- Biology
- Emotional Regulation
- Dissociation
- Behavioral Regulation
- Cognition
- Self-Concept

These DVDs describes those domains of impairment and how to assess families so that appropriate treatment can be provided.

There is a large body of literature describing the effects of early maltreatment on later child development, behavior, and functioning. Children reared in orphanages show a significant cognitive delay of eight IQ points when compared with similar children who are placed in foster care or raised with their biological parents. "These results point to the negative sequelae of early institutionalization," (Nelson, Zeanah, Fox, Marshall, Smyke, & Guthrie, 2007, p. 1937). Children with histories of maltreatment, such as physical and psychological neglect, physical abuse, or sexual abuse, are at risk of developing severe psychiatric problems (Gauthier, Stollak, Messe, & Arnoff, 1996; Malinosky-Rummell & Hansen, 1993). These children are likely to develop Reactive Attachment Disorder (Lyons-Ruth & Jacobvitz, 1999; Greenberg, 1999) and may be described as experiencing Complex Trauma. When the trauma experienced is caused by the abuse or neglect inflicted by a primary caregiver, the normal development of secure attachment is disrupted. Such children are at risk of developing a disorganized attachment (Lyons-Ruth & Jacobvitz 1999; Solomon & George, 1999; Main & Hesse, 1990). Disorganized attachment is associated with a number of developmental problems including dissociative symptoms (Carlson, 1988), depression, anxiety, and acting-out symptoms (Lyons-Ruth, 1996, Lyons-Ruth, Alpern, & Pepacholi, 1993).

Children who have experienced chronic early maltreatment and resulting complex trauma are at significant risk for a variety of other behavioral, neuropsychological, cognitive, emotional, interpersonal, and psychobiological disorders (Cook, A., et. al., 2005; van der Kolk, B., 2005). Many children with histories of maltreatment are violent (Robins, 1978) and aggressive (Prino & Pyrot, 1994) and as adults are at risk of developing a variety of

psychological problems (Schreiber & Lyddon, 1998) and personality disorders, including antisocial personality disorder (Finzi, Cohen, Sapir, & Weizman, 2000), narcissistic personality disorder, borderline personality disorder, and psychopathic personality disorder (Dozier, Stovall, & Albus, 1999). Neglected children are at increased risk of social withdrawal and rejection, and have pervasive feelings of incompetence (Finzi et al., 2000). Children who have histories of abuse and neglect are at significantly higher risk of developing Post Traumatic Stress Disorder as adults (Allan, 2001; Andrews, Varendin, Rose, & Kirk, 2000). Sexually abused children are at significant risk of developing anxiety disorders (2.0 times the average), major depressive disorders (3.4 times average), alcohol abuse (2.5 times average), drug abuse (3.8 times average), and antisocial behavior (4.3 times average) (MacMillian, 2001). Adverse childhood experiences have profound effects on later development, physical health, psychological development, and on a variety of other domains (Edwards, Holden, Felitti, Anda, (2003). Providing for the effective treatment of such children is a public health concern (Walker, Goodwin, & Warren, 1992), (Felitti, 2002).