



# Supporting the Social-Emotional Learning and Development of Children in Your Care

*Naomi goes to school and spends most of the day alone. She often stares off into the distance and doesn't respond when others try to talk to her. During therapy, she complains that she has no friends.*

*Right after coming in from making mudpies outside, Tyson races to the dinner table, grabs a meatball with his bare hand, and stuffs it in his mouth, letting the sauce drip from his lips onto the kitchen floor. He holds a second meatball with his other hand and hides it in his pocket for later.*

Often, kids like Naomi and Tyson have not learned how to interact with others, verbally and nonverbally, in ways we consider socially acceptable. For various reasons, they may not have learned such skills as being respectful, having "good manners," or controlling their emotions and behavior. On the contrary, they may have been taught and learned those specifics; however, their trauma response may be preventing them from accessing those skills at this time. It might help to know a bit about what kids have experienced before they come into care and how that affects their social-emotional learning and development. Doing so can often help you take the most helpful approach.

## How Children Learn Social-Emotional Skills

As children grow, they learn social-emotional skills in many ways, including:

- By observing and engaging with the world around them
- Learning from others in their life, such as parents, teachers, and peers
- By "reading" other people through their nonverbal behavior
- By recognizing their own emotions, being able to name their feelings, and managing them

A child in your care who has been removed from their birth family has had this learning interrupted. The first step is to learn about the child's social strengths and challenges.

## Start by Observing

Watch the child when they interact with others and consider the following:

- Does the child identify and express feelings in particular circumstances?
- Are they considerate of others' feelings, and do they get along with others?
- Do they express frustrations and anger appropriately?
- Do they interpret or "read" other people's behavior and unspoken messages?
- Is the child friendly and helpful to others?
- Are there specific social situations (school, playground, dinner table, shopping mall) where the child

cannot control their emotions and/or has poor judgment?

If any of these areas are challenging for the child, think about how you might best support them so they can learn and grow to navigate the social world. This may be a mix of actively seeking ways to enhance skills and simply being patient while the child heals from the trauma that initially interrupted this skill-building. Following are some additional thoughts for consideration:

- If the child has trouble managing feelings, it may be a sign of trauma. Kids who have experienced trauma often have difficulty regulating their emotions. For example, a child who has just been tucked into bed may cry inconsolably from feelings of fear.
- If the child is unable to name their feelings, they may be out of touch with their emotional life and how it affects their interactions with people. How can we expect children to show empathy when they don't understand when they are sad or hurt?
- A child who reacts unexpectedly to eye contact, personal space, body posture, tone, and voice volume may not know how to read body language. It has been said that nonverbal behavior is 90% of the message, so kids with this challenge are missing much of what friends and family are trying to communicate.
- Sibling interactions—a child in a sibling group may give clues about the child's social habits. For example, an older child who has had to care for younger brothers and sisters may talk excessively to fend for younger siblings.

### **The Role of Culture and Typical Child Development**

It may also be helpful to remember that “manners” are somewhat relative and depend on our lens, including family culture. For example, while using silverware to eat meals may be the norm in your home, if a child in your care comes from a culture where it is customary to eat with their hands rather than silverware, it can be easy to make assumptions about their behavior. It is important to recognize that what you may perceive to be a deficiency in skills is simply a cultural norm you may not be familiar with.

Remember, too, that children in care may develop at different rates. Their developmental age may not match their chronological age, meaning the 12-year-old in your care may have the social skills of an eight-year-old, and no one may have formally assessed that. If assessments are being done on the child, it may help to share what you've observed regarding social skills.

### **Supporting Children as They Develop Social Skills**

The best approach may be to involve everyone who helps care for the child. Once you have an idea of where the strengths and challenges are, you can bring this information to the table with:

- Birth parents. Sometimes, just sharing your observations about the child with the birth parents in a non-judgmental way will encourage a conversation that will help you understand how and why the child interacts with others the way they do.

- Caseworker. Ask what the child experienced in their birth home that could have impacted their social skills.
- Child's therapist. The child's therapy provider may be able to shed light on the child's experience of the world and offer tips for building social skills or simply help the child heal from the trauma they have experienced.
- Child's care team. Collaborate with the child's team. Teams can offer perspectives that give you food for thought and provide them with the information they need to make good decisions about the child's care plan.
- Other caregivers. While confidentiality must be front and center, you may be able to bounce some general ideas off other caregivers in your network.

## Practical Suggestions

If trauma is behind some of the things you've observed, then practicing acceptance, patience, and trauma-informed parenting are the first steps in helping the child in your care grow their social skills. Here are some suggestions:

- Show kids what personal space means and how not to invade others' personal space.
- Practice making eye contact during conversations.
- Read storybooks about friendships and social interactions. Discuss if there were successful interactions and why.
- Role-play in various social situations (teasing at school, talking to a clerk, calling someone on the phone).
- Practice good manners within the home (please, thank you, excuse me) and praise your kids when they display them.
- Practice how to meet others, including starting and ending a conversation.
- Discuss facial expressions and body language between actors on TV.
- Practice the use of different body language and the different messages it gives.
- Practice negotiation—how to get what you want appropriately.
- Practice "out to eat" behavior at the home dinner table, using manners and etiquette.

As a caregiver, you know that modeling good social-emotional skills is essential to the well-being of the children you care for. You may find that reevaluating your expectations can make a big difference. Keep in mind that kids who have experienced trauma may need time to heal before they are ready to take on many standard developmental tasks. Patience will sometimes be your best tool.

# Resources

## From [the Resource Library](#)

- *Be Polite and Kind*, by CJ Meiners
- *Self-Reg How to Help Your Child (And You) Break the Stress Cycle and Successfully Engage With Life*, by Dr. Stuart Shanker
- [Partners Newsletter Winter 2015](#)
- *Everything I Do You Blame On Me! – A Book to Help Children Control Their Anger*, by Allyson Aborn
- *Ready To Play*, by Stacey R. Kaye

## Learn in the [Champion Classrooms](#)

- [An Introduction to Trauma's Influence on the Brain, Body, and Behavior](#)