In older infants post traumatic response includes:

- Re-experiencing the traumatic event (traumatic play, re-enactment play, dissociative response, eg, dazed expression, stereotypical behaviour, extreme withdrawal, periodic unresponsiveness);
- Numbing of responsiveness (emotionally subdued, socially withdrawn, restricted play);
- Hyperarousal (irritability, emotional lability, temper tantrums, hypervigilance or signs of fear and aggression, eg, head banging, scratching own face).
(Zeanah & Scheeringa, 1996)

Factors that are considered to lead to severe responses include:

- Intensity of traumatic event;
- Child's proximity;
- Witnessing versus hearing about the event;
- Familiarity/identification with perpetrator, victim or both.
(Osofsky, 1996)

In domestic violence all of the factors that increase the severity of the post traumatic response apply. Usually in traumatic circumstances the immediate support and emotional availability of caregivers mitigates adverse effects. However, the obverse may happen when the trauma is perpetrated in the family – the presence of the violent parent is a cause for alarm for the child. The parents' capacity to deal with the trauma themselves is an important influence in how successfully they can provide their child with the emotional resources to deal with trauma. Parents exposed to violence are likely to have difficulty being emotionally available, sensitive and responsive to their children (they are in survival mode, they may be dissociating or suffering from other PTSD symptoms themselves, ie, they may be traumatised by their own exposure to violence) (Osofsky, 2000).

The literature emphasises that reinstitution of a safe, stable and nurturing environment is crucial for recovery from trauma. In the case presented the intervention included:

- A structured ward program that enhanced the infant's autonomy and pleasure in feeding, provided developmentally appropriate play therapy and interaction experiences, and minimised impingement and anxiety for the infant;
- A referral to statutory protective services to ensure safety for the mother and infant. This included seeking a court order with conditions that supported the mother-infant relationship as the primary nurturing relationship;
- Allocation of a primary nurse as an adjunct attachment figure and a primary nursing team while the infant was an in-patient; and
- Mother-infant psychotherapy.

REFERENCES

Bowlby, J. (1959) 'The Nature of the Child's Tie to the Mother', *International Journal of Psychoanalysis*, 39: 350-373.

Chatoor, I. (1997) 'Feeding Disorders of Infants and Toddlers', in *Handbook of Child and Adolescent Psychiatry : Infants and Preschoolers; Development and Syndromes*, S. Greenspan, S. Wieder and J. Osofsky (eds), 1: 367-385.

Drell, M., Siegal, C. & Gaensbauer, T. (1993) 'Posttraumatic stress Disorder', in *Handbook of Infant Mental Health*, C.H. Zeanah (ed), New York, Guildford Press: 291-304.

Osofsky, J. (1996) 'Introduction: Assessing and Treating Young Victims of Violence.' *Zero to Three*, 15(5): 5-8.

Osofsky, J. (2000) 'Infants and Violence: Prevention, Intervention, and Treatment', in *WAIMH Handbook of Infant Mental Health*, J. Osofsky and H. E. Fitzgerald (eds), John Wiley and Sons. 4: 161-190.

Winnicott., D.W. (1971) 'The Mirror Role of the Mother and Family in Child Development', *Playing and Reality*, D. W. Winnicott . London, Tavistock.

Zeanah, C.H. & Scheeringa, M.D. (1996) 'Evaluation of Post traumatic Symptomatology in Infants and Young Children Exposed to Violence', *Zero to Three*, 16(5): 9-14.

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Child Protection Australia 2001-02: First National Results

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