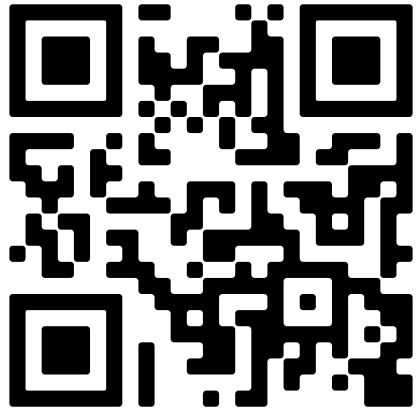


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Unspoken Struggles: Navigating Trauma, ADHD, Autism, and Sensory Needs in Families

By Shelby Czarnick

LICSW, ADHD-CCSP, Rooted in Relationship Coach, Founder of Essential Life Tools

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Why is this important?

Why is what you do important?



You are working with kids! You influence the next generation!

You have the opportunity to break icky family cycles!

You can help a struggling child & family become a thriving adult and a thriving family system!

And sometimes the work is really hard.



Today's Promise:

Better questions to ask

A way to sort through the overlap

A framework and interventions for the need you find





Getting Present

Together Brief Meditation

Sound bowl seance

Why Is This So Messy!

Why Do We Get Confused!

Why Is This So Messy!

ADHD, Autism, Sensory, and Trauma exposure are not rare!

1 in 5 children ages 3–17 had ever been diagnosed with a mental, emotional, or behavioral health condition in 2021

About **11.4%** of U.S. children ages 3–17 have ever been diagnosed with ADHD

CDC estimates about **1 in 31** children age 8 has been identified with autism spectrum disorder.

1 in 20 children in U.S. population estimate Sensory processing

23.3% of children ages 5–17 experienced ACEs

This is NOT the exception. This is the everyday work.

Why Is This So Messy!

When one is present, it is often not the only thing in the room.

Nearly **78%** of children with ADHD have at least one co-occurring condition

50–70% of individuals with autism also present with ADHD symptoms or diagnosis

Sensory profiles can overlap with autism, ADHD, and other developmental concerns.

Sensory processing problems are more common in children with ADHD than in typically developing children

Children with ADHD were more likely to experience every type of ACE measured

It is common when one system is stressed, others show up.

Why Is This So Messy!

Behaviors look the same on the surface.

Trauma and toxic stress can affect children's attention, decision-making, learning, stress response, and relationships

ADHD, autism, sensory overload, and trauma can all show up as meltdown, shutdown, aggression, refusal, avoidance, or missed follow-through.

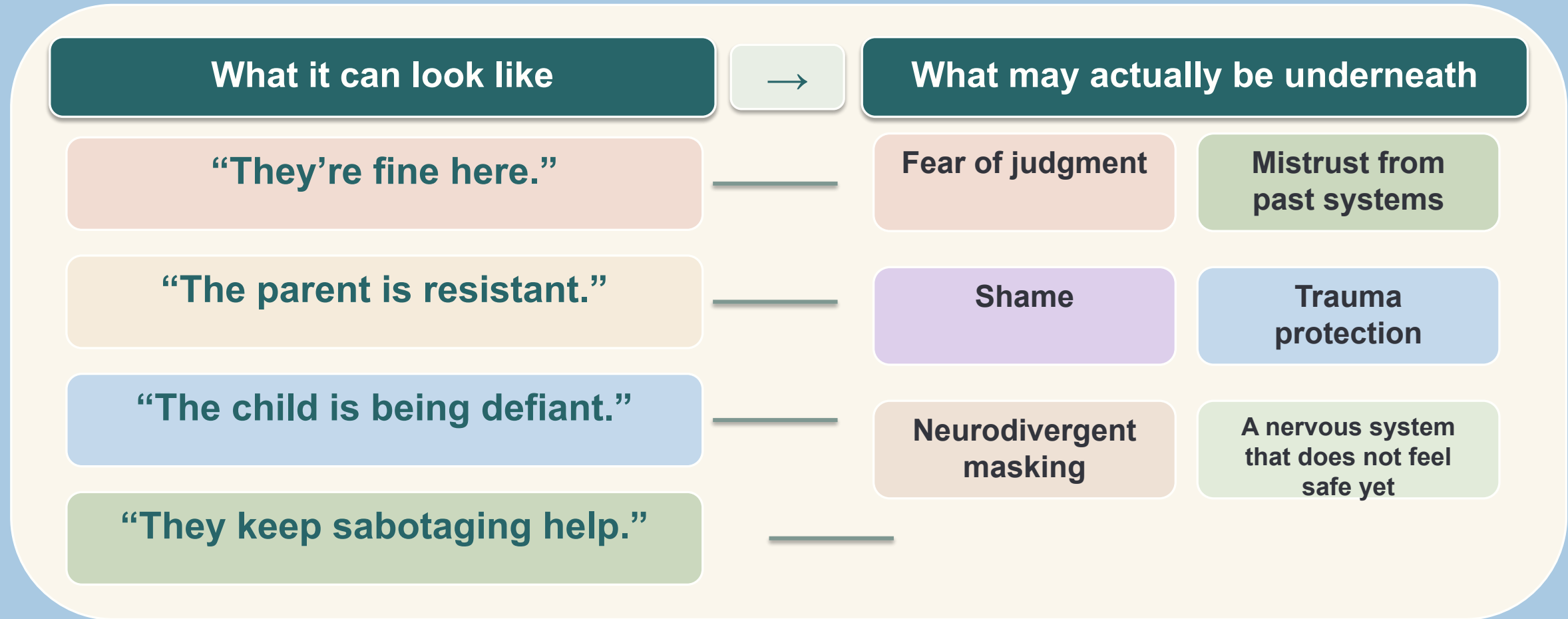
The behavior may look the same, but the root may be different.

Connection is Assessment

If they do not trust us yet, we may not be seeing the real symptoms.

What Looks Like Resistance May Be Protection

Pause before the label. Look for what the nervous system or family system may be protecting.



What We Are Taught Is

We ASK: What behavior are we seeing?

We DO by:

1. Identify the behavior
2. Document the behavior
3. Reduce the behavior
4. Teach a replacement behavior.

“Behavior is not the whole story.”

“We miss nervous systems and family systems”

Assessment has to go DEEPER!

Asking a Different Question to Find the Pattern and Root

Use Different Questions to Discover the One Shining the Most to Start

**Question to find ...
What system is overloaded?**

“How exactly did this happen?”



Ask
"How exactly ...?"



Let's be Curious!

Don't Forget the Family

For ages 0–8, the parent/caregiver piece is not optional. It is the intervention.

We can use the same questions with them and expand the tunnel vision of looking at the individual to looking at the system.

How to Sort the Overlap?

What System is Overloaded?

Trauma: Is the body protecting?

ADHD: Is the pause button/executive function overloaded?

Autism: Is communication, flexibility, social interpretation, or predictability overloaded?

Sensory: Is the body saying “too much”?

Family stress: Is the whole system out of bandwidth?

**What happened right before?
What’s missing (skill)?**

Look Beneath. Build What's Missing.



Framework for Now and After the Discovery

Look Beneath. Build What's Missing.

Regulate & Connect → Notice → Flip → Teach → Fade

1. Regulate

Calm the body enough to access learning.

2. Connect

Build enough safety for truth, trust, and cooperation.

3. Notice the pattern

"How exactly did that happen?" What keeps happening? When? With whom? What makes it better or worse?

4. Flip the struggle

What strength is hiding here? What skill is missing?

5. Teach the skill

Directly, visually, repeatedly, in real life.

6. Fade support

Hand-over-hand → side-by-side → independence.

Understand better so we intervene better.

How to Connect

How do we connect with those that do not want to connect, don't know how to connect and unknowingly push us away?

Step 1:

We **stop assuming** it is refusal.

Sometimes it is mistrust. Sometimes it is shame. Sometimes it is their own trauma response. Sometimes their body learned that help is not safe. Sometimes help feeling unsafe was a natural and impulse reaction.

When They Can't Connect Yet

To build safety before you ask for honesty.

Five small moves that lower the threat level

1

Regulate yourself first

Before correcting, breathe, soften your face, lower your speed, and get curious.
Use: "I notice..." or silently notice the pattern without chasing every comment.

2

Start beside them, not at them

Use parallel connection: movement, play, drawing, dancing, organizing the room, or doing something nearby while they settle. Ask interests ahead of time.

3

Track the pattern, not the decoy

Do not chase every comment, refusal, or power struggle.
Notice what the nervous system is protecting.

4

Give control without losing structure

Use a visual agenda. Ask, "Anything you want to add?" Use a parking lot for next time.
"You do not have to tell me everything today. What would make this 5% safer?"

5

Flip the struggle into a strength or skill

Instead of "He argues with everything," try: "His brain is an inconsistency detector."
Use that strength to notice what matches, what doesn't, and how to ask safely.

When They Can't Connect Yet

To build safety before you ask for honesty.

Trust is built, not demanded

$$\text{TRUST} = \frac{\text{predictability} + \text{consistency}}{\text{time (x)}}$$

X how much time is determined by the one your building trust with

**If we assess before safety,
we may only assess the mask.**

“Connection is not always warm and fuzzy at first. Sometimes connection is structure, predictability, and not overreacting when they test whether we are safe.”

Behind every struggle is either a strength to uncover or a skill to build. Our job is to find it.

“Before we ask, ‘How do I stop this behavior?’ ask, ‘What is this behavior trying to protect, communicate, or show me?’”

Take this from today and make it happen tomorrow!

1

Challenge!

Ask for handout and use it!

Same Behavior, Different Root
A Monday Morning Sorting Tool

Use this when a child's behavior is loud, confusing, repetitive, or hard to shift. The goal is not to label the child in the moment. The goal is to pause long enough to ask: **What might this behavior be protecting, communicating, or showing me?**

START HERE — Match the Behavior to the Support

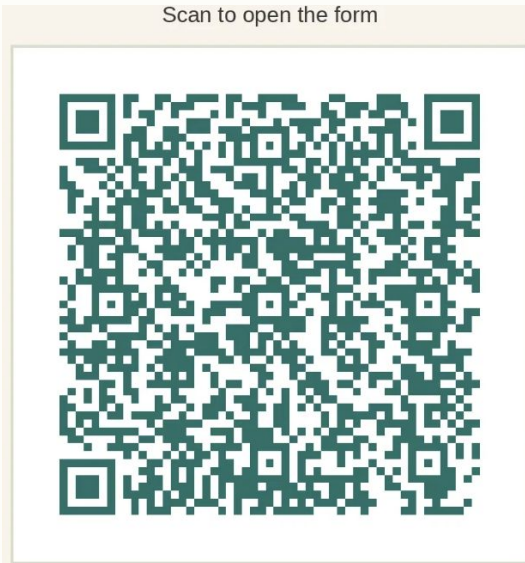
Safety / threat system Meltdown, refusal, shutdown, aggression, missed follow-through Try: Make the next step smaller. Lower your voice. Increase predictability.	Regulation / executive functioning "Won't listen," argues, interrupts, or can't shift Try: Use fewer words, visual cues, movement, and one clear next step.
Communication / flexibility / sensory-social interpretation Avoids, repeats, controls, or misses social meaning Try: Offer 2 choices. Prompt/visual changes/routine. Use concrete language. Support transitions.	Body / sensory system Escalates with noise, touch, light, crowds, waiting, or movement demands Try: Change the environment before demanding more coping.
Family / caregiver stress system Adults feel stuck, ashamed, blamed, or out of bandwidth Try: Reduce shame. Build trust. Choose one smaller next step. Consider if anything above is also.	

TRY THIS BEFORE YOU ESCALATE — Use One Child, One Behavior, One Smaller Support

Look for the pattern before choosing the intervention. Write just enough to help you choose a safer next step.

1. The behavior I keep seeing:

Scan to open the form



2

Help Me Build What You Actually Need



Tool to tell me how to help!
<https://forms.gle/LK85D2EETVq929F96>

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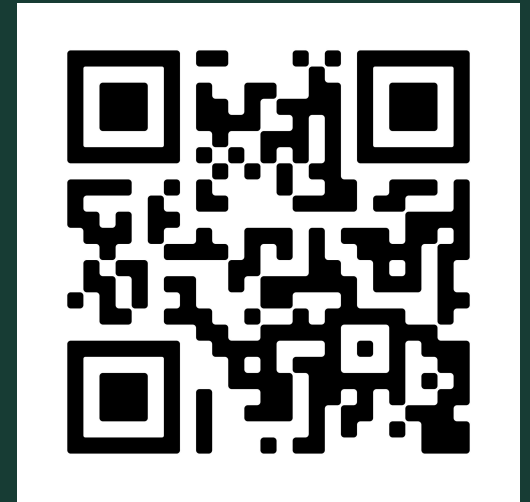


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Thank you for attending this session.
Please be sure to **submit your feedback** online!

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References

Boswell, E., Crouch, E., Odahowski, C., & Hung, P. (2025). Examining the association between adverse childhood experiences and ADHD in school-aged children following the COVID-19 pandemic. *Journal of Attention Disorders*, 29(1), 42–52. <https://doi.org/10.1177/10870547241290673>

Centers for Disease Control and Prevention. (2024, November 19). *Data and statistics on ADHD*. <https://www.cdc.gov/adhd/data/index.html>

Centers for Disease Control and Prevention. (2025, June 5). *Data and statistics on children's mental health*. <https://www.cdc.gov/children-mental-health/data-research/index.html>

Centers for Disease Control and Prevention. (2025, May 27). *Data and statistics on autism spectrum disorder*. <https://www.cdc.gov/autism/data-research/index.html>

Centers for Disease Control and Prevention. (2026, March 2). *About adverse childhood experiences*. <https://www.cdc.gov/aces/about/index.html>

Crasta, J. E., Salzinger, E., Lin, M.-H., Gavin, W. J., & Davies, P. L. (2020). Sensory processing and attention profiles among children with sensory processing disorders and autism spectrum disorders. *Frontiers in Integrative Neuroscience*, 14, Article 22. <https://doi.org/10.3389/fnint.2020.00022>

Ghanizadeh, A. (2011). Sensory processing problems in children with ADHD: A systematic review. *Psychiatry Investigation*, 8(2), 89–94. <https://doi.org/10.4306/pi.2011.8.2.89>

Hours, C., Recasens, C., & Baleyte, J.-M. (2022). ASD and ADHD comorbidity: What are we talking about? *Frontiers in Psychiatry*, 13, Article 837424. <https://doi.org/10.3389/fpsy.2022.837424>

Ide-Okochi, A., He, M., Tokieda, T., Nakamura, S., & Matsunaga, N. (2024). Assessment of sensory processing issues in children with neurodevelopmental disorders and experiences of maltreatment. *Children*, 11(2), Article 216. <https://doi.org/10.3390/children11020216>

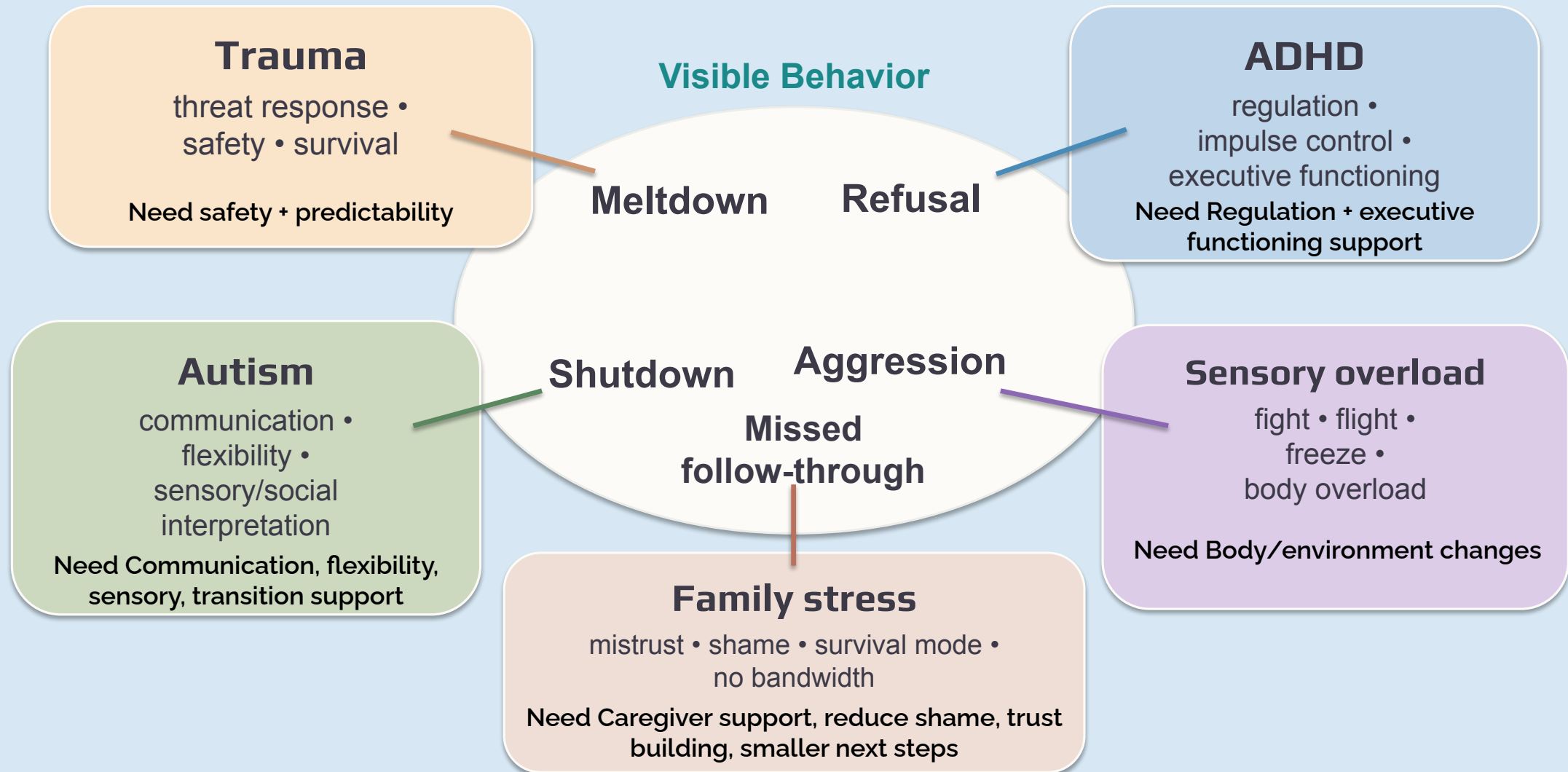
Okumura, K., Takeda, T., Komori, T., Toritsuka, M., Yamamuro, K., Takada, R., Ikehara, M., Kamikawa, K., Noriyama, Y., Nishi, Y., Ishida, R., Kayashima, Y., Yamauchi, T., Iwata, N., & Makinodan, M. (2024). Adverse childhood experiences exacerbate peripheral symptoms of autism spectrum disorder in adults. *Psychiatry and Clinical Neurosciences*, 78(10), 580–587. <https://doi.org/10.1111/pcn.13712>

Song, Y., Zhao, Y., Baranova, A., Cao, H., Yue, W., & Zhang, F. (2024). Causal association of attention-deficit/hyperactivity disorder and autism spectrum disorder with post-traumatic stress disorder. *Psychiatric Genetics*, 34(2), 37–42. <https://doi.org/10.1097/YPG.0000000000000357>

Webster, E. M. (2022). The impact of adverse childhood experiences on health and development in young children. *Global Pediatric Health*, 9. <https://doi.org/10.1177/2333794X221078708>

CDC page dates verified from the live CDC pages; the article details for Ide-Okochi, Okumura, Song, Hours, Webster, Crasta, and Ghanizadeh were checked against indexed article/PubMed/PMC records.

What behavior are we seeing?



Same behavior. Different roots. Different supports.

What System is Overloaded?

