

Adoption Advocate



Technology and Internet Safety for Foster and Adopted Youth: A Trauma-Informed Guide to Navigating the Online World

BY BARB CLARK

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Introduction

Parenting in the digital age is hard for everyone. Most caregivers are trying to figure out how to balance screen time, social media, gaming, online friendships, and safety concerns while also helping children build independence and healthy relationships with technology. For adoptive, foster, and kinship caregivers, however, these challenges are often even more complicated. Children with trauma histories frequently have differences in brain development, emotional regulation, impulse control, social understanding, and executive functioning that make navigating the online world especially difficult.

Technology itself is not inherently bad. It can provide connection, creativity, entertainment, education, and even emotional support. Many young people build meaningful friendships online and find communities where they feel understood and accepted. Technology is not going away, and most caregivers recognize that. The goal, then, is not to eliminate technology entirely, but rather to

help children use it safely and successfully. The challenge is that many trauma-impacted children are navigating an adult-sized online world with brains and nervous systems that are not developmentally prepared for it.

When adults today were growing up, childhood looked very different. They spent long days riding bikes, exploring neighborhoods, playing sports, or swimming at local lakes and pools with relatively little supervision. In the 1980s and 1990s, there was a major societal shift toward increased supervision of children, largely driven by fears around child abduction and community safety.¹ Then the internet arrived and became more accessible to families, and eventually smartphones followed. Suddenly, children were carrying the entire world around in their pockets. Yet as a society, the risks of allowing unrestricted online access are often underestimated. Caregivers remained highly focused on protecting children from dangers outside the home while unintentionally allowing countless risks to enter directly into their homes through screens and devices.

¹ Fass, P. S. (1997). *Kidnapped: Child abduction in America*. Oxford University Press.

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Today, many children gain access to smartphones and social media long before they have the developmental skills needed to navigate these spaces safely. For foster and adopted children with trauma histories, the risks are often magnified.

Trauma and the Developing Brain

One of the most important concepts caregivers can understand is the effect of trauma on brain development. This can include trauma experienced after birth, including [preverbal trauma](#), as well as prenatal traumas such as exposure to alcohol and/or drugs during pregnancy. Trauma impacts how children think, regulate emotions, process information, respond to stress, and make decisions.²

Children in foster, adoptive, and kinship families who have experienced significant early adversity may function developmentally younger than their chronological age.³ This is not always obvious because some children have strong expressive language skills. A

teenager may sound mature, use sophisticated vocabulary, and appear socially capable on the surface while functioning much younger in areas such as emotional regulation, judgment, problem-solving, comprehension, or impulse control. A 16-year-old, for example, may have the emotional maturity of a 5-year-old, the social skills of an 8-year-old and the cognitive skills of a 10-year-old. Developmental mismatches between areas of functioning can create enormous challenges for children as they navigate the online world.

Caregivers often hear or think things like:

- “They should know better.”
- “I already explained this.”
- “They’re old enough to understand.”
- “Why do they keep making the same mistake?”

Knowledge does not automatically equal capacity. Many caregivers have the common experience of explaining an expectation multiple times, only to watch their child make the same unsafe choice again. This can be incredibly frustrating and can leave caregivers wondering if the child simply was not listening or did not care. In reality, many trauma-impacted children may know the rule but lack the neurological skills to consistently apply it in the moment. Understanding a safety rule while regulated is very different from accessing that knowledge when faced with curiosity, peer pressure, excitement, fear, or a highly stimulating online environment. In those moments, executive functioning skills become critical, and these are often areas of significant challenge for children who have experienced trauma. Children with

² Substance Abuse and Mental Health Services Administration. (2014). *SAMHSA's concept of trauma and guidance for a trauma-informed approach* (HHS Publication No. SMA 14-4884). U.S. Department of Health and Human Services.

³ Waite, D., Spinks-Franklin, A., Simkins, J., Council on Foster Care, Adoption, and Kinship Care, & Section on Developmental and Behavioral Pediatrics. (2026). *Developmental challenges of young children in foster care: Clinical report*. *Pediatrics*. Advance online publication. <https://doi.org/10.1542/peds.2026-077418>

trauma histories may struggle with executive functioning skills such as:

- impulse control,
- planning ahead,
- predicting consequences,
- flexible thinking,
- time management,
- emotional regulation,
- organization,
- and decision-making.

These challenges can significantly impact online behavior. For example, a child may impulsively send a private photo, share personal information, engage in risky conversations, click unsafe links, overspend money in games, or respond emotionally on social media without fully understanding the long-term consequences.

Many trauma-impacted children also think very concretely. Much of online safety education is worded abstractly, including language like:

- “Be careful online.”
- “Don’t trust strangers.”
- “Think before you post.”
- “People may not be who they say they are.”

These are complicated concepts for children who struggle with abstract reasoning and social judgment. A child may genuinely believe that an online “friend” is trustworthy because the person is kind, validating, or shares similar interests.

Children with trauma histories and other early life adversities are often particularly vulnerable to online grooming, manipulation, and exploitation because many deeply crave

connection, belonging, attention, and approval. Online relationships may feel safer and easier than face-to-face relationships. Some children may also struggle to recognize red flags, interpret social cues accurately, or understand unsafe intentions.

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Technology and the Nervous System

Another important consideration is how technology impacts the nervous system. Due to trauma’s impact on their brain development, foster and adopted children may be living in a state of chronic stress or dysregulation. Screens, games, videos, and social media can become powerful forms of escape, stimulation, distraction, or emotional regulation. Gaming, scrolling, and online interaction may also temporarily reduce anxiety, boredom, loneliness, or emotional discomfort.

For some children, technology becomes one of the few areas in which they feel successful, connected, or in control. This does not mean caregivers should allow unlimited access, but it does mean that removing devices or ending screen time may trigger very real distress

responses. What looks like “overreacting” or “manipulation” may actually reflect nervous system dysregulation, rigidity, anxiety, or poor flexibility skills. Understanding the “why” behind the behavior helps caregivers respond more effectively.

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Understanding Screen Time Battles Through a Brain-Based Lens

Screen time conflicts are extremely common in families raising foster or adopted youth. A frequent challenge occurs when caregivers and children agree on a screen time limit, but when the time is up, the child becomes extremely upset and refuses to stop.

Some trauma-impacted children may struggle with “time blindness.”⁴ Time blindness refers to difficulty internally sensing, managing, and “feeling” the passage of time. These children may not truly understand what five minutes, thirty minutes, or an hour feels like. As a result, they often feel as though they “just got on” the device, even when significant time

has passed. Visual timers can be extremely helpful because they make time concrete and visible.

Transitions can also be particularly difficult for children with rigidity and poor flexibility skills. For example, a child may agree to stop gaming at 7:00 p.m. but then start a new online tournament at 6:45 p.m. that lasts another thirty-five minutes. At 7:00 p.m., the caregiver sees defiance. The child experiences panic, frustration, and unfinished closure. A more effective approach may involve previewing transitions and problem-solving ahead of time.

For example, a caregiver might check in around 6:30 p.m. and ask:

- “What are you doing online right now?”
- “How much longer is this game or video?”
- “What would be a realistic stopping point?”

In the example above, the caregiver and child may together agree to stop at 7:20 instead. The caregiver can then set their own reminder to return before the transition and help support the child through ending the activity successfully. With online gaming, often the tournament ends, and the child starts a new one. The caregiver may assume this was intentional, and it usually is not. This proactive approach often works better than abrupt demands followed by escalating power struggles between the parent and child.

⁴ Ptacek, R., Weissenberger, S., Braaten, E., et al. (2019). Clinical implications of the perception of time in attention deficit hyperactivity disorder (ADHD): A review. *Medical Science Monitor*, 25, 3918-3924.

Watch for Vulnerability to Online Relationships

Foster and adopted children, especially those with significant trauma histories, are often highly vulnerable to online relationships that feel validating or emotionally intense. Many have attachment wounds, rejection sensitivity, or low self-esteem and experience loneliness. An online friendship or romantic relationship can quickly become deeply important to them, even if the relationship is unsafe.

Caregivers should remain curious and involved rather than simply punitive.

Instead of only saying:

- *“You’re not allowed to talk to them,”*

try open-ended questions such as:

- *“Tell me what you like about this person.”*
- *“How do they make you feel?”*
- *“What do you know about them?”*
- *“What are some ways people can pretend to be someone else online?”*

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Balancing Safety and Connection

Many caregivers experience a significant value clash around technology. Some adults grew up with very limited technology and understandably worry about how much time children spend online. At the same time, technology is deeply integrated into modern social life. Online gaming, texting, social media, and digital communities are often important parts of how young people connect with peers, but with these connections comes inherent risk.

For some children, online spaces may meet legitimate social needs. The goal is not perfection but balance, safety, connection, and individualized support for each child and their family. What works well for one teenager may be completely inappropriate for another teenager of the same chronological age. When thinking about internet safety for children and teens, caregivers must consider the youth’s developmental functioning, emotional maturity, vulnerability level, and their individual strengths and challenges.

One additional consideration for adoptive, foster, and kinship families is the role technology can play in maintaining connections with birth family members. Maintaining safe and healthy connections to a child’s birth family, culture, and personal history is an important part of their identity development and can support long-term emotional well-being. Technology has made these connections easier than ever through texting, video calls, social media, and messaging apps. For some families, these tools allow children to maintain meaningful relationships across long distances when in-person visits are not possible.

At the same time, technology has also introduced new complexities. Children may receive unexpected messages from birth family members, be contacted through social media without a caregiver's knowledge, or initiate contact impulsively or secretly before they are emotionally ready. Birth family members may unintentionally share information that is confusing, overwhelming, or developmentally inappropriate. In other situations, contact can be healthy and positive for the child but still stir up complicated feelings of grief, loyalty, sadness, anger, or confusion. A child who appears calm during a conversation may experience significant emotional or behavioral dysregulation afterward.

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Whenever possible, caregivers should approach birth family contact with curiosity and preparation rather than fear. Discussing ahead of time how contact will occur, what information is appropriate to share, and what the child can do if a conversation becomes uncomfortable helps build safety. Younger children and those with developmental delays often benefit from having a trusted adult nearby during virtual visits or while communicating online. After contact, caregivers can check in with the child, help them process their emotions, and recognize that behaviors later in the day or week may be connected to the emotional impact of that interaction.

Caregivers should also consider how technology-related consequences may unintentionally affect important relationships.

Taking away a phone, tablet, or online access may seem like a logical consequence for unsafe technology use, but if that device is also how a child communicates with birth family or other significant people in their life, the consequence may inadvertently remove those connections as well. Safe birth family contact should not be something a child has to earn through good behavior or lose because of challenging behavior. If technology access needs to be restricted for safety reasons, caregivers can look for alternative ways to preserve planned contact, such as supervised phone or video calls on a caregiver's device. This allows caregivers to address unsafe technology use while protecting relationships that are important to the child's identity, history, and sense of connection.

Just as there is no single approach to technology that works for every child, there is no one-size-fits-all approach to birth family contact. The goal is not simply to maximize or minimize contact, but to ensure that interactions are emotionally safe, developmentally appropriate, and centered on the child's best interests. With proper boundaries and preparation, technology can strengthen healthy relationships and support identity development for many children. For others, increased supervision, clearer boundaries, or temporary limits may be necessary until they have the skills and supports to navigate those relationships safely.

Co-Regulation Matters

Many caregivers attempt to manage technology struggles through lectures, punishments, or repeated warnings. While consequences may sometimes be necessary, regulation and connection almost always

need to come first, especially with children who have experienced trauma and disrupted attachments. Co-regulation is the process of helping a child return to a calm, regulated state by first using a calm presence, voice, and relationship to help regulate their nervous system.⁵ Before children can learn to self-regulate, they often need repeated experiences of being co-regulated by a trusted adult. A dysregulated child cannot think clearly, reason effectively, or problem-solve well.

Caregivers often have more success when they:

- stay calm,
- lower their voice,
- provide structure,
- reduce shame,
- and help the child regulate before discussing behavior.

Children who already feel overwhelmed, rejected, or ashamed are less likely to learn from highly emotional confrontations and may become more dysregulated. Caregivers prioritizing connection and safety can help children regulate their emotions and more effectively learn and reflect on experiences with technology use.

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Expect Ongoing Teaching and Repetition

Many trauma-impacted children require significantly more repetition, supervision, and practice than their neurotypical peers. Caregivers will sometimes need to revisit the same online safety conversations repeatedly, such as:

- not sharing personal information,
- avoiding unsafe apps,
- recognizing manipulation,
- understanding privacy,
- and managing digital footprints.

This does not mean the child is intentionally being difficult. Many simply need more external structure, coaching, and support over a longer period of time because of their early life experiences and brain-based differences.

Practical Strategies for Safer Technology Use

There is no perfect formula for technology and internet safety for children and teens, and what works well for one child may not work for another. Caregivers should not feel guilty if their family's technology plan looks different from someone else's. Foster and adopted children often require individualized supports and supervision levels based on their developmental profile and specific vulnerabilities. Families should tailor their approach to technology use by centering their child's strengths and vulnerabilities as well as their own current capacities.

⁵ Rosanbalm, K. D., & Murray, D. W. (2017). *Caregiver co-regulation across development: A practice brief*. Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Consider Developmental Age, Not Just Chronological Age

One of the most important questions caregivers can ask is: “Does my child have the developmental skills necessary to safely handle this level of technology access?”

A child’s chronological age may not accurately reflect their readiness for unrestricted internet access, social media, online gaming, or smartphones. Some teenagers may still require supervision and restrictions that resemble those typically used with younger children. This is not about punishment or control. It is about matching supervision to developmental capacity. Think about using a different birth year when setting up technology, one which matches their developmental age.

Delay Smartphone Use When Possible

Many caregivers feel enormous pressure to provide smartphones at increasingly younger ages. However, unlimited internet access can create significant risks for vulnerable youth.

Some families choose to delay smartphones or use devices specifically designed with parental controls and monitoring features. Options such as the Gabb Phone, Pinwheel Phone, or Bark Phone can provide communication access while limiting exposure to unsafe content and interactions.

Restrictions are not about mistrust. They are about providing scaffolding and safety while children develop the skills needed for more independence. When children become frustrated or feel that the rules are unfair, caregivers can help reduce shame by explaining *why* the limits exist. Parents can say, “*The parts of your brain that would help keep you safe on that device haven’t developed enough yet.*” Notice that the focus is on brain

development rather than blaming the child. The message is not, “*You can’t handle this because you’re irresponsible,*” but rather, “*Your brain still needs more support right now, and that’s my job as your caregiver.*”

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Children who have experienced trauma, prenatal substance exposure, or other neurodevelopmental differences often hear messages that imply they are “bad,” “immature,” or “making poor choices on purpose.” Explaining technology limits through a brain-based lens helps preserve the child’s dignity while reinforcing that caregivers are providing support, not punishment. Just as a child with a broken leg would not be expected to run a marathon before they are healed, children should not be expected to safely navigate an online world before the brain systems needed for judgment, impulse control, and recognizing danger are sufficiently developed.

Avoid Giving Devices as Gifts

Many children who have experienced developmental trauma have very concrete thinking styles. When a device is given as a birthday or holiday gift, the child may genuinely believe the device fully belongs to them and that caregivers no longer have the right to supervise or limit access.

Some caregivers find it more effective to frame devices as tools that caregivers manage and supervise rather than personal possessions with unlimited access. Some families may frame this device as a “family cell phone” or “family video game system”.

Keep Devices in Shared Spaces

Allowing devices in bedrooms often creates additional risks, especially late at night when supervision is limited and emotional regulation tends to be lower.

Caregivers may find it helpful to establish household expectations such as:

- charging devices overnight in a common locked area,
- using screens primarily in shared spaces,
- and avoiding unsupervised nighttime access.

This can reduce exposure to unsafe online interactions, pornography, impulsive decisions, and sleep disruption.

When Technology Decisions Have Already Been Made

If the child has already been given a smartphone, allowed devices in bedrooms, created social media accounts, or made other technology decisions that this article recommends approaching differently, please do not carry guilt or shame. Parents are making decisions with the information they have at the time, often while managing behaviors, crises, and family dynamics that others cannot see. Pulling back on technology

is often far more difficult than delaying access in the first place, and for some families it may not be realistic or even safe to make dramatic changes overnight. Families can start where they are, making small adjustments when possible, such as increasing supervision and adding supports, as well as continuing to learn alongside the child.

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If a child has already made an unsafe choice online, caregivers should know that this is common, particularly for children who struggle with impulse control, judgment, or predicting consequences. It is also realistic to expect that unsafe choices may happen again. Rather than viewing another mistake as proof that the child “didn’t learn their lesson,” caregivers can view it as another opportunity to teach, increase supports, and adjust the safety plan. Most importantly, try not to do the teaching in the moment when the child has just been caught with their hand in the proverbial cookie jar. Shame, fear, defensiveness, and dysregulation can make it very difficult for a child to learn. Address the immediate safety concern, but save the larger conversation for later, when the child’s brain no longer feels like it is “caught.” That is often a much better time to talk about what happened, practice what they could do differently next time, and reinforce safe and appropriate technology use.

It is important for caregivers to give themselves grace. Parenting trauma-impacted children and youth is rarely about doing everything perfectly; it is about putting forth the best effort possible with the resources and energy while keeping connection and safety at the center.

Conclusion

Parenting foster and adopted children in the digital age can feel overwhelming. Many caregivers feel exhausted trying to monitor devices, manage screen time battles, navigate social media risks, and protect vulnerable children from online dangers that did not exist when they were growing up.

There is no perfect technology plan, and caregivers will make mistakes along the way. The priority for caregivers is remaining connected, curious, involved, and willing to adjust supports as children grow and develop. Some children may eventually handle significant independence online.

Others may require long-term supervision, restrictions, or scaffolding. That is not failure; it is responsive, trauma-informed parenting in the digital age. Some children may need no online access unless strong supervision accompanies it. Others can handle certain technology with tailored parameters in place. Caregivers can expect to encounter some bumps in the road, as does any caregiver who is setting expectations around technology use. Be mindful not to shame children and youth when encountering these bumps. Use these times as learning experiences, increase safety, and try again.

Parameters set around technology safety should not be based solely on a child's chronological age or societal expectations. Families should also consider a child's developmental readiness, nervous system regulation, and individualized needs. When caregivers understand the impact of early life experiences on the brain, the behavior often begins to make much more sense. With that understanding, caregivers can better help children learn to navigate technology safely.

Resources

- Online Safety Book List for Kids: <https://www.reconnect-families.com/blog/kids-books-about-online-safety-jhxm4-4ckak-h5ekj>
- Zoe and Molly Online: <https://zoeandmolly.ca/app/en/>
- Teach Your Dragon Online Safety: https://youtu.be/VXlaAK_mQEc?si=WmppJnypWYhBBcjI
- Cyber Safety Consulting: <https://www.cybersafetyconsulting.com/>
- Common Sense Media: www.commonsensemedia.org
- Family Online Safety Institute: <https://www.fosi.org/>
- Connect Safely: <https://connectsafely.org/>
- Kids Health: <https://kidshealth.org/en/parents/net-safety.html>

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About Barb Clark



Barb Clark is known for her down-to-earth style, blending honesty, humor, and practical wisdom to empower caregivers and professionals. Her trainings tackle tough topics like raging, lying, and stealing with compassion and clarity, offering real-world strategies that actually work. She has trained thousands across the U.S., Canada and beyond, supporting those impacted by trauma, FASD, and neurodiversity. As the adoptive parent of five adult children, including one with FASD,

Barb brings lived experience and deep insight to her work in her business, FASD Mosaic. Diagnosed with FASD at age 56, she brings even greater authenticity to her first book—*Raising Kids and Teens with FASD: Advice and Strategies to Help Your Family Thrive*.

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