

Trauma and children

Age and a person's maturity can influence how they react to a traumatic experience. Children's responses may differ to adults in that they might find it difficult to understand what has happened. They may be unable to describe how they are feeling and instead may express themselves in other ways. Despite these differences, children and adolescents can experience the full range of problems experienced by adults following a traumatic event. Even very young children are affected by trauma, and display similar reactions to those seen in older children and adolescents.

This fact sheet provides some general information about trauma and children. A child's age impacts on the way they express their distress and on what they need in order to recover – a primary school-aged child will express how they feel differently compared with an adolescent. Consult the resources listed on this fact sheet for more age-specific information.

Signs of difficulties

There are some signs to look out for in children who may be having difficulties days or weeks after a traumatic event. They do not necessarily lead to long-term problems. Most are normal and will resolve in time with the help of caring family members and friends.

Reliving the trauma

- Repetitive play that re-enacts the trauma
- Distressing dreams of the event that may evolve into general nightmares of monsters or of threats to self or significant others
- In cases of traumatic loss, children often report experiencing 'ghosts' of loved ones
- Disorganised or agitated behaviour
- Preoccupation with other traumatic events
- Distress when confronted by anything that reminds them of the trauma(s)

Avoiding reminders of the event and feeling numb

While less common in children than in adults, some of the signs are:

- Withdrawal from people and wanting to be alone
- Losing interest in significant activities

- Not being able to imagine themselves as grown up in the future
- A return to 'babyish' behaviour

Being overly alert or wound up

If tense and frightened, children may:

- Have trouble concentrating and paying attention
- Cling and seem dependent
- Be fearful, especially at night or when separated from parents
- Have trouble sleeping
- Be grizzly, whiny or irritable

Other problems can include

- Aches and pains
- Bed wetting
- General misbehaviour and 'naughtiness'
- Tantrums and attention seeking behaviour
- Poor school performance, losing motivation

How parents and families can help

How parents, family and friends respond is very important in helping children to cope with a traumatic event. Occasionally problems might be delayed until some time after the trauma and often these signs can be misunderstood. It is important to recognise that the child's behaviour may be a response to the distressing experience, rather than just 'naughty' behaviour. It is crucial not to become angry and blame the child for this behaviour. Responses that help include:

- Ongoing communication: talk about what is happening and how family members feel
- Reassure children that they are safe and cared for
- Listen and talk to them about the experience, honestly and openly. Like adults, the unknown is often more frightening than the reality for children
- Give the child some special attention, especially at bedtime
- Welcome expression of emotions — they are part of the healing process
- Comfort the child when they are distressed
- Support the child and allow them time to work through the experience
- Enjoy activities together as a family.
- Keep family roles clear. Don't expect children to take too much responsibility nor become too overprotective. Try to understand if they cannot fulfil their role for a time — like going to school or helping around the house — but talk about how they will resume normal activities as soon as possible

When to get professional help

If the reactions described in this fact sheet are severe or continue for more than two weeks, the child could be experiencing a more serious reaction and may need professional help. Contacting a health practitioner is also recommended if a child is experiencing:

- Severe and continued sleep disturbance
- Severe anxiety when separated from loved ones
- Continued fears about things which may remind the child of the trauma
- Behaviour problems at home or school
- Self-doubts, withdrawal or other significant changes in emotions or personality
- A return to 'babyish' behaviour that the child had outgrown
- Intense and ongoing emotional upset
- Substance use, dangerous behaviours, or unhealthy sexual activity among adolescents

Getting professional help for children at risk of developing longer-term problems is crucial. If left untreated severe reactions can interfere with a child's development over a range of areas including identity and self-esteem, schooling, intellectual development and, healthy family and peer relationships. Some children develop psychiatric conditions such as posttraumatic stress disorder, depression, anxiety and a variety of behavioural disorders.

It is particularly important to protect children from ongoing exposure to trauma. Repeated exposure to traumatic events can affect the child's brain and nervous system and increase the risk of low academic performance, high-risk behaviours, and difficulties in peer and family relationships.

There are effective treatments for children. The family doctor is a good first port of call. They can determine if there is a problem and what the best approach might be. Mental health professionals such as psychiatrists, psychologists and social workers can also help.

Cognitive-behavioural therapies (CBT) have been proven effective in helping children with traumatic stress. CBT interventions include the following elements:

- Teaching children to relax and manage symptoms of anxiety
- Helping the child to create a coherent story of the traumatic event
- Talking to children about their beliefs about the trauma (e.g. why it happened) and correcting any wrong or unhelpful beliefs (e.g. self-blame)
- Helping children re-engage with day-to-day activities
- Supporting families

Resources

- The National Child Traumatic Stress Network has more detailed information on the effect of trauma on young children, school-aged children and adolescents (<http://www.ncts.net.org>).
- The United Kingdom National Institute for Clinical Excellence (NICE) provides treatment recommendations for children and trauma. The NICE guidelines are available from their website (<http://www.nice.org.uk>).