

TEACHER RESOURCES: PRE-SCHOOL AGE CHILDREN

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Trauma responses in pre-schoolers

What are the developmental challenges for pre-school age children?

From infancy to early childhood, children learn to develop a sense of trust in their parents from which they will begin to explore and master their environment. Piaget referred to this period as the Sensorimotor period where an infant progresses from reflexive, instinctual action to beginning to understand symbolic thought. It is the period in which rational thought is developed. This is also the stage of asking questions. There is a need to make sense of their environment. From the age of about two years the child begins to develop autonomy. This is characterised by the development of courage and independence, increased risk-taking behaviours and the beginning of setting self-limits.

Parenting and environment post trauma

The post trauma or post disaster environment may be such that parents and other caregivers are unable to provide basic needs such as food and shelter. In addition, high anxiety in parents may lead to restrictive parenting. A natural disaster may result in restrictive parenting to protect the child, a disorganised and unstable home environment because of moving house or changing school, the possibility of sharing and overcrowding in accommodation and school classrooms, and a lack of familiarity with surroundings at home or at child care and school for the child.

How do young children react following trauma?

Following natural disasters like the Black Saturday Bushfires in Victoria (February 2009) young children may have increased symptoms of anxiety. Children learn that the world is a dangerous place. The child may believe that the fires are an ongoing threat to them. The child may develop a sense of doubt about self which may result in a reluctance to attempt new things. The child may develop frustration when unable to achieve their goals due to increased anxiety or the post trauma environment. Some children may show behaviours that may be aggressive or overly assertive to parents and caregivers. Aggressive behaviours, such as throwing objects, hitting or yelling are also common reactions. There may be increasing reliance on parents and caregivers rather than increasing autonomy. Some children may develop guilt about their needs and desires in light of their parents' and family's needs, and may begin to seek to protect their parents from distress.

There is a commonly held misconception that children under the age of five are immune to the negative effects of trauma. However, young children may actually be the most vulnerable due to their limited coping skills, rapid period of emotional and physical development and strong dependence on their caregivers to keep them safe. Trauma responses to be aware of in young children include:

- Re-experiencing the trauma
 - o Through 'traumatic play' such as repetitively playing out scenes of family's home burning down, drawing (eg, of fire-damaged community) and repeatedly talking about the event
 - Preschoolers may also experience distressing nightmares or night terrors
 - o Preschoolers may become emotionally (eg, uncontrollable crying, tantrum) and physiologically distressed (eg, pale, shaking, racing heart) around reminders of the trauma (eg, smell of burning toast, sirens). Note: Due to their limited verbal skills, these reminders may not always be obvious in young children and may not be able to answer questions accurately about what may be upsetting them.
- Avoiding conversations, people or reminders of the event
 - o In young children, this may be subtle (eg, turning head, leaving room, distraction) or appear unrelated (eg, defiance, emotional outburst)

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- o Preschoolers may also become more withdrawn from family, teachers and friends
- o Some children show less interest in play or have restricted exploratory behaviour
- In addition some young children sometimes appear to be frozen, spaced out or unresponsive.
- Hyper-arousal symptoms contribute to disturbed sleep (eg, taking longer to fall asleep, night
 waking), increased irritability, easily startled by loud noises, difficulties with concentration and
 increased activity levels)
- *Emotional* changes (eg, moodiness, extreme fussiness, emotional outbursts for no obvious reason and difficulties calming down)
- Behavioural changes (eg, physical or verbal aggression towards family members and friends, temper tantrums, demanding attention, unusually whiney)
- Separation anxiety or excessive clinginess to primary care-giver or teachers (eg, crying upon separation, insisting to be picked up, won't stay in room alone)
- Regression in previously acquired developmental skills (eg, loss of bowel control, talking like a baby, thumb-sucking)
- Development of new fears that are unrelated to the trauma (eg, the dark, monsters, animals)
- Increase in physical complaints (eg, stomach-aches, headaches)
- Changes in appetite (eg, fussy eating, no appetite)
- Interpersonal difficulties that may stem from the child having less trust in their caregiver to keep
 them safe (eg, less affectionate with parents) or as a result of their behavioural changes (eg,
 unpredictable outbursts, aggressive and demanding behaviour, excessive clinginess) and emotional
 dysregulation (eg, increased irritability, difficulties calming down)

Pre-school and early childhood teachers – what you should consider following natural disasters

When working with pre-schoolers, it is particularly important to consider the impact of the trauma within the context of the parent-child relationship. This is because, in comparison to any other age, the parent-child relationship is uniquely important in very young children. They are completely dependent on their caregivers to provide them with a safe, secure and predictable environment and to assist them with the development of skills that provide a buffer for stressful experience.

Parents are also at increased risk of experiencing adverse psychological outcomes which may impact on their ability to parent effectively following trauma. Highly distressed parents may model their fear responses and maladaptive coping responses to their child and may be compromised in their ability to help their child to process and cope with their distressing trauma symptoms. Research has shown that there is a significant association between parent distress and children's emotional and behavioural functioning. Therefore, it is important to be aware of how parents are coping with the trauma and whether they would also benefit from some support.

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Key points

- o Preschoolers are vulnerable to the negative effects of trauma.
- There can be tremendous individual variability in trauma responses. Therefore, you need to be aware of children who are exhibiting behaviour problems as well as children who are more quiet and withdrawn.
- o Behavioural manifestations of trauma (eg, tantrums, aggression, hyperactivity) may be misinterpreted as ADHD or oppositional behaviour.
- Pre-schoolers are particularly at risk of adverse outcomes if they witnessed threat to their parent, were separated from their parent or if their parent reports significant psychological distress.
- o Sometimes the child may only have early childhood teachers for support if the parents are having difficulty coping as well.