

TRAUMA REACTIONS IN YOUNG PEOPLE

Information sheet produced for the Victorian Bushfire Support and Training for Affected Schools Project

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Young people's reactions to traumatic events

When a young person experiences a traumatic event, it is often unclear the types of reactions they might display, or how this event might affect them in the longer term. Many children and adolescents will experience some type of reaction following traumatic events, but fortunately, most are resilient and gradually return to their previous functioning over time. However, there are some young people who continue to experience difficulties over time.

Children can express trauma reactions in very different ways to adults.

- Many children are **resilient** and experience only **few** reactions. Some report feeling more confident or finding other positive changes following trauma. We call this **Post Traumatic Growth**.
- Some children may express a **lot of different reactions**, or one intense reaction, **immediately** following the event, but **gradually return to their previous functioning** over time.
- Some children express **immediate reactions**, and these **persist** over time. Sometimes the reactions can even change over time.
- Some children **appear resilient at first**, but **display reactions later on**.

Most children are resilient

One important thing to remember is that many children are resilient in the face of trauma. Not all children will develop problems after experiencing a traumatic event. Some will display only a few immediate reactions and others will become more resilient over time, as life starts to go back to normal.

Some common reactions to traumatic events like the Black Saturday Bushfires include:

- Asking lots of questions about the event or future or avoiding talking about what has happened
- Wanting to help others who have been affected
- Crying, feeling down
- Bad dreams or nightmares about different things
- Being more clingy and having fears of separation from loved ones, homes, pets
- Trouble getting to sleep, waking from sleep, occasionally sleepwalking
- Physical reactions (fast beating heart, upset stomach, headaches)
- Feeling grumpy and losing temper
- Trouble concentrating
- Difficulty with schoolwork
- Agitation
- Difficulty interacting with peers and adults
- Playing, drawing and re-enacting parts of the trauma
- Difficulties with everyday functioning (eg, not completing homework, forgetting to pack bags, bring swim gear)
- Feeling shocked.

'Not all children experience these reactions. Young people may express some, many or even none of these reactions.'

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Longer-term reactions: Persistence of symptoms

Some children's symptoms will persist or worsen over time, and others still might only start to show symptoms at a later date. Therefore it is important to consider that some of the reactions listed above may be evident months, or even years later. How these symptoms are expressed may change over time. For example, in the long-term, initial trouble concentrating may result in knowledge gaps. As the child falls further and further behind, behaviour problems begin to emerge. For some, these become so interfering that they are considered to cause 'clinical' levels of distress. For other children, having experienced the traumatic event may simply cause them to react differently to events over the following year than they would have previously. Some everyday events (eg, bullying, exams, fighting with friends) may trigger emotional or behavioural reactions (eg, anxiety, depressed mood, fighting) that the person would not normally demonstrate.

How can you work out what the problem is and arrange the help needed?

Sometimes teachers might be in the best position to notice children's reactions and behaviours. However, sometimes it can be quite difficult to work out what is happening for the young person by observing their behaviour. Here we provide some hints for how to gather more information, how to determine whether the problem requires assistance, and how to arrange such assistance.

What can you do to gather more information?

- Talk to the young person - It lets them know that you are concerned and want to help. Having someone who will listen is often exactly what youth are after.
- Get the school counsellor or guidance officer involved if you think you need help or the young person won't talk at all.
- Get background information. Talk about your concerns with the young person's parents/caregiver.
- Dealing with disclosures: Sometimes when talking to young people, they may disclose sensitive information, either about the traumatic event you are discussing, or about other traumatic events that you were not aware of. It is important for teachers to be aware of their duties and responsibility to both the young person and others and to consult with school administrators where appropriate. In many cases, teachers may choose to encourage or even help the young person to disclose this information to other support persons (eg, parents) or help the young person identify ways in which they can receive support for their difficulties from external sources.

How to determine whether the problem is more serious?

It is normal for children to show some changes in behaviour, or difficulties managing emotions immediately following exposure to traumatic events. Fortunately, the majority of children are resilient and will return to their normal functioning over time. However, some young people will experience more intense and interfering reactions or reactions that persist over time, which most often benefit from further assessment and intervention.

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Further assessment or intervention may be indicated if:

- Symptoms persist or worsen over time.
- The young person shows a significant decline in concentration, academic performance or classroom participation that interferes with their daily functioning or causes significant distress.
- Ongoing or worsening difficulties regulating emotions (eg, difficulty controlling emotions such as crying, anger).
- Significant and lasting changes in social functioning (eg, withdrawing from friends, fighting, interpersonal difficulties, physical and verbal aggression) that causes problems for the young person or others.
- Behaviours that disrupt others and the classroom environment on a regular basis.
- Difficulties that cause the child or others significant distress or concern (including the family).
- Behaviours or difficulties that prevent the young person from engaging in age-appropriate tasks or developing appropriately (eg, advancing academically, advancing socially, maturing appropriately, interruptions to developmental milestones such as speech, language)
- Return to a behaviour typical of a younger child (eg, difficulties toileting, using 'baby talk').
- Evidence that the problems exist outside of school as well. For example, the problem occurs in multiple settings (at home, with friends, at school).
- Parents or caregivers have concerns about the child's/family's functioning, request assistance, or are distressed by the situation.
- The presence of ongoing stressors outside of school which may exacerbate difficulties (eg, financial difficulties, housing issues, parental separation, death of a family member).

What to do when you think the problem requires attention?

There are many different ways in which you can help the young person and their family. It is important to know when you can help, when to utilise school-based resources and when you might need to make a referral to an external agency. Below are some guidelines/suggestions for what you can do when you think the child needs further help.

- School-based support services can be a good starting point.
- Be familiar with your school's guidelines and policies for such issues.
- Get to know the support resources available within your school such as student welfare co-ordinators, school nurses, school psychologists, student support service officers, chaplains, youth workers and principals.
- Think about what you as a teacher can do to help the young person or the whole class following traumatic situations.

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- Refer on for further assistance.

Sometimes, no matter how supportive the classroom or home environment is, young people may require professional assistance following traumatic events. Professional help can be sought both inside and outside the school setting. Discuss referral options with parents and/or the young person. Early intervention is considered important.

- *Community services and help lines:* There are some services that parents and young people (and teachers) can access at any time, without having to go in and see someone in person. Many of these can be found on the internet, and a few key services are listed below. Your student support service officer or school counsellor might be able to help you find more services available in your area.

Kids Helpline – 1800 551 800

Lifeline – 13 11 14

Parentline – 13 22 89

Australian Centre for Grief and Bereavement – 1300 664 786

Beyond Blue – www.beyondblue.org.au

- See your *local general practitioner* (GP) for an assessment and referral to a psychologist or counsellor.
- *Mental health professionals:* Young people and parents can also seek private individual assistance from various allied health professionals, in particular, clinical psychologists who are trained in assessment, diagnosis and treatment of various emotional and behavioural difficulties in childhood and adolescence.
- *Community-based mental health professionals:* Families may be eligible to receive assistance through their local Child and Adolescent (Youth) Mental Health Service (CAMHS or CYMHS). In most instances, families are able to self-refer for this service by calling their local centre.
- *Victorian Bushfire Psychological Counselling Voucher Program:* Further information is available by calling **1800 180 213** or at:

<http://www.dhs.vic.gov.au/bushfireappeal/Fund-Payments/support-payments/psychological-support-package>
- *Private mental health professionals:* Families are also able to arrange for assistance through private psychologists. Families should first contact their GP to obtain a referral and to assess their eligibility for rebates through Medicare. Parents may also independently seek private practitioners through the Australian Psychological Society (APS) at:

<http://www.psychology.org.au/FindaPsychologist/Default.aspx>

In addition, families may also be eligible for rebates through private health funds and should contact their health provider to enquire about rebates.