Children's Reaction to Trauma: Suggestions for Parents

Trauma can change the way children view their world. Assumptions about safety and security are now challenged. Children's reactions will depend upon the severity of the trauma, their personality, the way they cope with stress and the availability of support. It is common for children to regress both behaviorally and academically following a trauma. A good way to view the situation is that they are normal children in an abnormal circumstance. It is natural for children to first experience some sort of denial that the situation really happened. Fears, worries or nightmares are common following a trauma. Sleep disturbances or eating difficulties may happen. Also children may begin to regress emotionally or act younger than their chronological age. They also may become more clinging, unhappy and needy of parental attention and comfort. Feelings of irritability, anger, sadness or guilt may often emerge. Somatic complaints such as headaches, stomachaches or sweating are not unusual. Children and adolescents may repeatedly relive the trauma by acting it out in play or dreams. Other students may seek to avoid all reminders of the trauma by withdrawing from others, refusing to discuss their feelings, or avoiding activities that remind them of the people or places associated with the trauma. Some loss of interest in school, misbehavior, and poor concentration are other common reactions.

These symptoms may range from mild to severe. More severe symptoms may indicate that your child is experiencing Post Traumatic Stress Disorder or Depression.

What can parents do to help?

The following list of suggestions may assist you in responding to your child's symptoms:

1. Children experiencing self-blame and guilt: Parents should help the child figure out events that he/she can control from those that are uncontrollable. Additionally parents can encourage their child to talk positively about themselves.

Children experiencing helplessness and hopelessness: Parents can ask the child to write or tell current feelings and record pleasant thoughts 3 to 4 times a day in order to increase pleasant thoughts over a period of 4 to 6 weeks.
Children losing interest and experiencing a "blue mood": Arrange an interesting activity per day; plan for future special events; discuss enjoyable topics.

4. Children who lose their appetite or experience weight problems: Don't force eating; prepare favorite foods; make meal-time a pleasant occasion.

5. Children who experience sleep difficulties: Keep regular bed-time hours; do relaxing and calming activities one hour before bed-time such as reading or listening to soft music; end the day with a positive experience.

6. Children who are agitated and restless: Change activities causing agitation; teach the child relaxation techniques; massage may help; encourage physical exercise and recreation activities.

7. Children experiencing excessive fears: Minimize anxiety-causing situations and uncertainty; be supportive and reassuring; planning may reduce uncertainty.

8. Children demonstrating aggressive behavior and anger: Use a kind but firm approach to let your child know that the behavior is unacceptable. Let your child know that their emotions are normal, but encourage your child to express his or her anger in appropriate ways. Do not react in anger; be consistent with your responses to inappropriate behavior. Let your child know that many emotions are normal responses to trauma such as sadness, guilt, loneliness, fear, pain, and isolation.

If your child's symptoms persist or you are concerned about your child's reactions, contact your school's psychologist, school social worker, school counselor or your community mental health center.

NOTE: This handout is adapted from the Trauma and Children (Authors: Lazarus, P.J.) and Depression in Children (Authors: Saklofske, D., Janzen, J., Hildebrand, D., and Kaufmann, L.) Handouts for Parents, published by the National Association of School Psychologists, Andrea Canter and Servio Carroll, editors., 1998. (301) 657-0270 www.naspweb.org

Your Reaction to Trauma: Suggestions for Teens

Trauma can change the way you view your world. You may feel unsafe and insecure about situations and places you normally would enjoy. Your reactions to trauma will depend upon how closely you were involved with the people involved in the trauma, your personality makeup, your normal way of handling situations, and the type and amount of support you have in your life. It is common for youth, like you, to have difficulty controlling your emotions or to become disinterested in normal activities. A constructive way to view this situation is that you are normal kids involved in an abnormal circumstance.

It is natural for you to first experience some sort of denial. Fears, worries or nightmares are common following a trauma. Sleep disturbances or eating difficulties may happen. Also, you may begin to regress emotionally or act younger that their your age. You may become more clingy, unhappy and needy of parental attention and comfort. Feelings of irritability, anger, sadness or guilt may often emerge. Somatic complaints such as headaches, stomachaches or sweating are not unusual. You may repeatedly relive the trauma by acting it out in activities or dreams. Other youth, like you, may seek to avoid all reminders of the trauma by withdrawing from relationships, refusing to discuss their feelings, or avoiding activities that remind them of the people or places associated with the trauma. Some loss of interest in school, misbehavior, and poor concentration are other common reactions.

These symptoms may range from mild to severe. More severe symptoms may indicate that you are experiencing Post Traumatic Stress Disorder or Depression. You need to be aware of how you are coping and try to seek assistance.

What can you do to feel better?

The following list of suggestions may assist you in getting back on track:

1. If you find that you are experiencing self-blame and guilt: Try to figure out which events you can control and which are uncontrollable. You didn't ask to be involved in this crisis...you just are. Try and be positive and focus on the good that you can do to help other youth avoid experiences like yours.

2. If you feel helpless or hopeless: Write or tell your current feelings to others. Share your experience. You are not alone. You need others and others need you. Try and participate in school and community events, memorial services, and future school violence prevention activities.

3. If you are losing interest and feeling down: Try to arrange an interesting activity every day; plan for future special events; discuss enjoyable topics; and focus on the future....You do have one.

4. If you lose your appetite or find yourself gaining or losing weight: Don't force yourself to eat; cook your favorite foods; make meal- time a pleasant occasion.

5. If you experience sleep difficulties: Keep regular bed-time hours; do relaxing and calming activities one hour before bed-time such as reading or listening to soft music; end the day with a positive experience.

6. If your feel that you can't concentrate and you feel restless: Change the activities that may increase your restlessness; participate in some activities that make you feel relaxed; increase your physical exercise and recreation activities.

7. If you feel overly scared or fearful: Participate in planned activities with your friends or family. Keep yourselves active and busy.

8. If you feel angry or you might want to strike back at yourself or someone else: Know that your feelings are normal. Express your feelings in appropriate ways such as talking to friends, family, and other adults that you trust; working out frustration and anger with physical exercise; or create a living memorial to your friends such as memory books, poems, or other artistic creations. Remember your emotions are normal responses to trauma-dealing with them requires good judgement, self-control, and positive support from others.

If you continue to feel emotions you are concerned about, contact your school's psychologist, school social worker, school counselor or your community mental health center.

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