Understanding a child’s response to trauma
What is a trauma?

A trauma is a very distressing, painful or frightening event. It can include experiencing a serious injury, being involved in a car accident or having a serious medical diagnosis.

A trauma is usually outside the normal events of life and because of this can overwhelm our coping skills and take away our sense of security. This is true for both adults and children.

Witnessing or hearing about a violent or traumatic event can also be highly distressing and can still have a psychological impact on someone. This can be especially true for parents and siblings of a child involved in a trauma.

Examples of traumas that a child might experience:

Accidents
• Car accident
• Accident at school
• Home-related accident
• Being attacked by a dog
• Near drowning
• Burn injury

Serious Illness and Medical Experiences
• A diagnosis of a serious illness
• Painful medical procedures
• Disfigurement and scars
• Self harm/suicide

Crime
• Domestic violence
• Physical and/or sexual assault
• Robbery
• Homicide
• Child abuse
• School Violence

Sudden Loss or a Crisis
• Death of a family member, friend or teacher
• Parents divorcing or relationship break-up
• Death of a loved pet
• Moving house or changing country

Disasters – natural and man-made
• Bushfires
• Floods
• Earthquakes
• Cyclones
• Terrorism
• Train accidents

Australian Centre for Posttraumatic Mental Health
This website deals mainly with serious and long term reactions to trauma (PTSD) but it does have some useful fact sheets on:
www.acpmh.unimelb.edu.au/

Victorian Department of Human Services

Royal Children’s Hospital Melbourne, Mental Health Service
www.rch.org.au/mhs
Fact sheet on post traumatic stress

USA National Institute of Mental Health

Parents Line
13 2055
Monday – Saturday (9am – 4.30pm)

Kids Helpline
1800 551 800
24hrs

Beyond Blue website
www.beyondblue.org.au

Kids Health
Visit Kids Health on Level 2 at The Children’s Hospital at Westmead or visit the website
www.chw.edu.au/healthykids

Books You Can Read

When Bad Things Happen to Good People
Kushnert, Harold, (1981), Willowgreen Publishing

Order from Chaos: Responding to Traumatic Events
Gibson, Marion, (2006), BASW/Policy Press Title: UK

Monahan, Cynthia, (1993/1997), Lexington

Books Children Can Read

A Terrible Thing Happened – a story for children who have witnessed violence or trauma

Appropriate for children 4 – 8 years

When Something Terrible Happens
Marge Heegaard, Woodland Press
A workbook for young children.
Trauma resulting from a crime or motor vehicle accident

If your child is experiencing significant emotional trauma as the result of a crime or a motor vehicle accident, they may be eligible for free counselling through Victims Services or the Motor Accidents Authority.

To enquire:
Victims Services NSW
Tel: (02) 8688 5511 (Sydney) or 1800 069 054

Motor Accidents Authority
Tel: 1300 137 131

Further information or help:
If you feel you need advice or help for you or your child, you could talk to your family doctor, the school counsellor, local Community Health Centre or the Social Work Department or Department of Psychological Medicine at The Children’s Hospital at Westmead
Tel: (02) 9845 0000.

Other useful contacts and resources:

So You’ve Been in an Accident website
For children, young people and parents/carers

Mental Health Association of NSW – Information Service
Tel: 02 9816 5688 or 1800 674 200
Email: info@mentalhealth.asn.au
www.mentalhealth.asn.au/info
Fact sheet on posttraumatic stress disorder

Transcultural Mental Health Centre NSW
Tel: 02 9840 3800 or 1800 648 911
www.dhi.gov.au/tmhc
Information for people who speak a language other than English

NSW Health Common Topics website

Victims Services, NSW Attorney General’s Department
Fact sheet on helping children cope with trauma

Victorian Government Better Health website
www.betterhealth.vic.gov.au

What are common reactions to trauma?

Most children involved in a traumatic incident will experience some kind of emotional reaction. Children’s responses to distressing events depend on a wide range of factors including their age, stage of development and the way in which the people around them respond to the crisis. Many children lack the verbal and thinking skills needed to cope effectively with sudden stress and at times reactions may show up in their behaviour.

It is important to remember that not every child has an immediate reaction to a traumatic event. Some may have reactions a few days, weeks or even months later. Some may never have a reaction. Outlined below are some commonly seen reactions to trauma. With time and the support of loving adults, most children will get over these reactions.

Preschool (1-5 years)
• Bed-wetting or incontinence
• Fear of darkness
• Clinging to parents
• Nightmares
• Fear of being left alone; separation from parents
• Regression i.e. behaving like a younger child e.g. baby talk, thumb sucking
• Changes in eating habits
• Play that re-enacts the trauma
• Physical symptoms

School Age (5-11 years)
• Changes in behaviour
• Worry that it will ‘happen again’
• Fears about safety of themselves or others
• Guilt that they were to blame in some way
• Physical complaints (headaches, stomach aches)
• Questions or statements about death
• Play that re-enacts the trauma
• Nightmares/sleep disturbances
• Changes in eating habits
• Not wanting to go to school
• Withdrawal or aggression
• Avoidance of things that remind them of the event
• Flashbacks

Adolescence (11-16 years)
• Wanting to discuss the event repeatedly
• Loss of interest in social activities with peers; withdrawal, isolation
• Repetitive thoughts or comments about death or dying
• Denial about the effect of the trauma
• Sleep and appetite disturbance
• Rebellion in the home and at school
• School problems (e.g. fighting, withdrawal, loss of interest, attention seeking behaviours)
• Physical complaints (e.g. headaches, vague pains, skin eruptions, bowel problems)
• Irresponsible behaviour or risk taking e.g. drugs and alcohol
• Flashbacks
How Parents Can Help

It is important that parents and carers look after their own emotional needs first. Recognise and deal with your own feelings or reactions to the trauma your child has experienced so that you can be available to reassure and parent your child confidently. This can be more of a challenge if you were involved in or witnessed the same traumatic event as your child and you may need help from others to do this.

Talk to your child:
• Gently explain to them what has happened in language they can understand. Don’t try to protect them from the truth
• Tell them that you love them and show them with cuddles and kisses
• Tell them that it was not their fault
• Tell them that you will take care of them
• Tell them it’s okay to feel upset or sad

Encourage your child to:
• Get enough sleep
• Get regular exercise
• Maintain their usual routine of school and activities
• Keep in touch with their friends

Allow your child to:
• Be sad or cry (don’t expect them to be tough and brave)
• Be angry. Try not to get angry yourself if your child has strong emotions. Don’t allow violence or aggression though
• Talk about the event as much as they want but don’t force them
• Talk about their feelings if they want to (don’t force them)
• Draw pictures about what they feel or what happened (only if they want to)
• Write about what they feel or what happened (only if they want to)
• Feel in control. If possible, let them choose meals or pick out clothes and make some decisions for themselves (when appropriate)
• Sleep with a light on if they are scared

Getting Help from Friends or Relatives

Friends and family can feel protective of you after a traumatic event or they may do the opposite and underestimate the impact of the event upon you or your child. It is important to be able to get the right help when you need it such as being able to talk freely, feel listened to, be reassured and supported to think things through. Practical help from others, including transport or doing some household chores can be a real aid in giving you extra time with your child or looking after yourself.

Telling Childcare or School

Schools and childcare providers are often equipped to manage traumatic events and provide follow-up support for students. Confiding in a teacher can therefore be helpful and will also allow for greater understanding of any difficulties your child may experience. It also allows teachers to keep an eye on your child and link them to other support people, such as a school counsellor. As school is often a familiar place, seeing a school counsellor can be less daunting than seeing other counsellors.

When is it time to seek extra help?

Most children’s reactions to trauma will gradually decrease over time (often up to a six-month period), however each child’s recovery time may vary depending on individual circumstances. Some signs that parents/carers may need to seek professional advice are:
• When the previously listed symptoms persist for longer than six months
• High levels of emotional or behavioural problems that are not improving or are getting worse e.g. depression, anxiety, withdrawal, anger or risk taking
• A child, or the family as a unit, who seemed to be coping well to begin with, is developing problems related to the trauma weeks or even months later
• Behaviour is occurring that is placing the child or others at risk of harm
• A child who is describing intrusive thoughts or flashbacks about the trauma
• Persistent avoidance of triggers associated with the trauma e.g. not being able to travel on the same road on which the accident occurred
• Behaving in a highly aroused way such as being watchful and wary and constantly living with a sense of fear