



Trauma  
Care

# Newsletter

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## TraumaCare

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## Trauma & Children



A traumatic experience differs from stress or a crisis. A trauma is an experience that is sudden, horrifying and unexpected. During a trauma the person believes that they or others around them will be seriously injured or killed. For children, as for adults, a distressing or frightening experience can challenge their sense of security and the predictability of their world.

Children's responses to these experiences depend on a wide range of factors. Some of these include their age and stage of development, and the impact on their parents or significant others including siblings or carers.

Emotional and psychological trauma is the result of extraordinarily stressful events that shatter your sense of security, making you feel helpless and vulnerable in a dangerous world.

Traumatic experiences often involve a threat to life or safety, but **any situation that leaves you feeling overwhelmed and alone can be traumatic, even if it doesn't involve physical harm.** It's not the objective facts that determine whether an event is traumatic, but your *subjective emotional experience* of the event. The more frightened and helpless you feel, the more likely you are to be traumatized.

### Causes of emotional or psychological trauma

An event will most likely lead to emotional or psychological trauma if:

- It happened unexpectedly.
- It happened repeatedly
- Someone was intentionally cruel
- It happened in childhood
- You were unprepared for it.
- You felt powerless to prevent it.



Emotional and psychological trauma can be caused by single-blow, one-time events, such as a horrible accident, a natural disaster, or a violent attack. Trauma can also stem from ongoing, relentless stress, such as living in a crime-ridden neighborhood or struggling with cancer.

Every child reacts differently – they may not react the way their parents or caregivers expect. Sometimes, distress reactions surface weeks or even months after the event. A trauma is not part of a child's normal experience. The event is so intense and frightening that it over-whelms the child's ability to cope. A trauma is always regarded as negative and damaging to the mental health of a child.

### Developmental Stages

The age of a child will affect the way in which they understand and react to a trauma and will also affect the child's symptoms. An understanding of the different phases of development can assist adults to understand and respond to traumatised children.

**INFANTS TO TODDLERS (Younger than 2 years)** - Although infants and toddlers are unable to communicate what has happened to them or their feelings, traumatic experiences do affect their behaviour: *Increased crying, needing attention, regression in behaviour and speech, eating problems, disrupted sleep, easily startled, less responsive, older end of this age group may involve aspects of the trauma in play.*

**PRESCHOOL CHILDREN (2 – 6 Years)** – As a result of egocentric thinking and an inability to reason, the child may misunderstand and misinterpret events. During this stage anything bad that happens is likely to be seen as a punishment and seen as punishment for something the child has done wrong. Symptoms can include: *Intrusive memories, may tell the story over and over again, may fear anything that is a reminder of the trauma, jumpy and easily startled, clingy, regression in behaviour and speech, post-traumatic play, withdrawn, eating and sleeping problems, headaches and stomach aches, irritable or aggressive.*

**PRIMARY SCHOOL (7 – 12 Years)** – After the age of 7, children gradually become less egocentric and begin to think more rationally in order to understand events. Symptoms of trauma can include: *Many of the symptoms of preschool children however their physical symptoms can be more pronounced, become irritable, rude and argumentative, outbursts of aggression, difficulties concentrating, hide their own feelings and have many difficulties at school.*

**ADOLESCENTS (13 – 18 Years)** – Adolescents reaction to trauma can vary widely, they can act like an adult or they can revert back to child like behaviour. Symptoms can include: *Revenge fantasies, fear, hyperarousal, acting out, feelings of shame and guilt, can become overly active, mistrustful of people, can run away from home, depressed feelings and thoughts of suicide.*

### What can Parents and Caregivers do

Children look to their parents and caregivers to gain understanding of a situation and find appropriate ways to deal with it.



A child's response to a distressing or frightening experience will depend on a wide range of factors including their age, stage of development and personality, and the impact of the crisis on their parents or significant others. Your child may not react in the ways you expect.

Trauma reactions may include:

- **Withdrawal** – such as loss of interest in activities, loss of confidence, not wanting to talk or regressing to more 'babyish' ways of behaving.
- **Preoccupation** – needing to relive the experience, for example, through repetitive play or drawings. The child may be overly concerned about the possibility of future events or may have nightmares.
- **Anxiety** – such as problems with concentrating or paying attention, clingy behaviour, separation anxiety, sleep problems and irritable behaviour.
- **Physical symptoms** – such as headaches and stomach aches.

Allow for a delayed reaction. Some children seem to cope well at first, but can experience reactions to the stress days, weeks or even months later.

### **Talk about the event**

It helps to bring all the issues out in the open. Suggestions include:

- Reassure your child that the event is over and they are safe (but only if this is the case). You may have to reassure them over and over again.
- Listen to your child. Take their concerns and feelings seriously.
- Let your child know that you would like to hear about how things are for them.
- Tell your child about what happened in a way that is appropriate to their level of understanding and without going into frightening and lurid detail. Use language they understand. If you keep accurate information from them, they will fill in the blanks using their experience, available information and their imagination.
- Make sure your child hasn't jumped to any wrong conclusions. For example, younger children may think that tragedies are their fault because they were naughty or thought bad things about someone.
- Talk about the event as a family. Allow everyone to have their say, including children. This helps everyone to overcome isolation, to understand each other and to feel supported and heard.
- Talk to your child about how people may react to distress. Tell them their feelings are normal in these circumstances and reassure them that they will gradually feel better.



## Your response is important

How the crisis impacts on you, and your reactions to your child's feelings and behaviour, will have an enormous impact on your child's ability to cope and recover. Issues to keep in mind include:

- Be understanding. Recognise that changes in behaviour, such as tantrums or bedwetting, may be the way your child reacts to distressing or frightening events.
- Give your child extra attention, particularly at bedtime and at other times of separation, if this is an issue for them.
- Children look to their parents or carers to understand a crisis and find ways to respond and deal with it. They need the adults around them to be able to 'tune in' to their fears and distress and to comfort and support them. If you are distressed and having difficulty with your feelings, reactions or relationships, it is important to seek support and help for yourself. If you don't, the child's fear and distress will increase.
- Talk about your feelings in an appropriate way with your child and allow them to talk about theirs.
- Remember that everyone is different and may have different emotions. Don't expect your child to feel the same way you do.
- Give your child a sense of control over their life. Even minor decisions, such as allowing them to choose between two sandwich fillings at lunch, makes the child feel more in control. This is especially important after the chaos of a crisis. Children who feel helpless tend to experience more severe stress symptoms.
- Try not to be overly protective of your child. It's natural to want to keep your family members close after a crisis, but you also want them to feel that their world is a safe place to be.
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## Family routines

Suggestions include:

- Keep to your regular routine as much as possible. The predictability of the family's day-to-day schedule is reassuring for children.
- Reassure your child that their routine will be back to normal as soon as possible. They may not be able to manage their usual routine for a while, such as attending school or performing household chores. Don't push it.
- Don't introduce changes such as new routines or stricter standards of behaviour. Leave that for another time.
- Maintain family roles if you can. For example, don't insist that your child take on more responsibility around the house than usual or expect them to meet the emotional needs of a distressed parent.



## Practical strategies

Suggestions include:

- Allow your child plenty of time to play and enjoy recreational activities such as sport, particularly favourite games and activities with 'best' and familiar friends.
- Allow time for fun. Laughter, good times and shared pleasure can help all family members to feel better.
- Don't insist on three main meals if your child's appetite is affected. If they don't feel like eating at mealtimes, offer them regular snacks throughout the day instead.
- Make sure your child gets enough rest and sleep.
- Involve them in some sort of physical exercise – it will help your child to burn off stress chemicals and improve their sleep.
- Limit stimulants like sugar, coloured foods and chocolate.
- Help your child to physically relax – warm baths, massages, story times and lots of cuddles can help relieve muscle tension.
- Intervene if an activity makes your child upset or anxious – for example, a television show that reminds the child of the trauma or promotes feelings of worry, alarm or fear. Don't be afraid to switch off the television if the program content is not supporting the child's recovery.

## Things to remember

- Children and adults will recover from distressing or frightening experiences given time and support.
- How you deal with the crisis yourself and how you react to your child's feelings and behaviour will have an enormous impact on their ability to cope.
- Tell your child the facts about what happened, in a way that is appropriate for their level of development and using language they can understand.

If after an extended period of time your child is still showing signs of distress and you are concerned, professional help may be indicated. Children who have trouble getting beyond their fears may be suffering from PTSD, or posttraumatic stress disorder. And that's when it's time to seek the assistance of a mental health professional. Many effective treatments are available for children and teens.

**TRAUMA LEAVES  
'FINGERPRINTS' ON  
THE VICTIM. THESE  
DON'T FADE WHEN  
THE BRUISES DO.**

Dr. Ellen Taliaferro

This newsletter has been issued by:

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Play Therapy \* Counselling \* Trauma Counselling

Please note that this information must not be used for diagnostic purposes. Please visit a medical professional for a correct diagnosis.