

Managing trauma and ways to recover

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Traumatic events overwhelm, challenge and question people's expectations of their safety and how their world works.



Describing trauma

People casually talk about 'being traumatised' by missing their favourite television show or by misplacing their car keys. Although these events can be upsetting, the definition of trauma is much more than a minor upset or being distressed for a short period of time. People often think that trauma is an unexpected, horrific event that is relatively rare, affecting only a few unlucky individuals. However, many people are affected by trauma to some degree, at one time or another during their life.

A traumatic event is an incident that is so frightening it overwhelms a person's ability to cope. Any coping skills a person may have had are weakened and they feel utterly helpless and hopeless. It is as if a person's legs have been knocked from under them.

Traumatic events involve situations where a person's life has been threatened or severe injury has occurred such as a car accident, a bad fall, a hospital operation, a natural disaster like a flood, fire or cyclone, or being the victim or witness of violence such as physical and sexual abuse. Trauma can be a one-off event as well as ongoing events.

The effects of trauma may be immediate or take some time to appear. Trauma that involves events between people, such as a child being abused by someone they know, is more likely to have a longer lasting effect than the result of events such as a flood or car accident.

Different types of trauma

One way to understand trauma is to break the events into different types:

Simple trauma

Simple trauma is a single event that lasts a short time and involves a one-off crisis. Most simple traumas are unexpected and generally people in the community respond in a supportive and helpful way. The causes tend to come from impersonal events such as car accidents, house fires, cyclones and floods.

Complex trauma

Complex trauma involves threats and violence between people. It generally involves a number of events and lasts longer than simple trauma. Often people who experience complex trauma feel unsupported, isolated and blamed, with a sense of shame and stigma. Examples of complex trauma include child abuse, bullying, family violence, rape, war and imprisonment.

Developmental trauma

Developmental trauma is when children are exposed to longstanding or repeated traumatic events. When this occurs it reduces the development of the 'thinking part' of a child's brain and limits the way they can manage their feelings and behaviour, affecting a child's ability to develop to their full potential. Developmental trauma includes incidents when children are neglected, abused or experience ongoing conflict between their parents and carers. The impact of complex trauma can lead to developmental trauma.

Children and trauma

Childhood trauma is the result of an event or a series of events which cause a child to feel helpless and pushed beyond their ability to cope. Trauma affects children differently depending on their age, personality and past experiences. When a child is traumatised it affects the whole child—their mind, body, spirit and relationships with others.

All children experience events which affect them both emotionally and physically and do not necessarily lead to trauma. Reactions to these events are usually brief and children recover without further difficulties. Other times, ordinary events that may not appear overwhelming from an adult's perspective can be very frightening for a child. These include falls, accidents and invasive medical and surgical procedures.

Some events are overwhelming to almost any child and include exposure to violence (e.g., witnessing a robbery), physical and sexual abuse or being forced to leave their home or country. These events can have an impact on young children not only from direct exposure but by seeing and hearing about them in films, on television and in the newspaper.

There is an incorrect, but widespread belief that young children are not affected by trauma and do not notice or remember traumatic events. Often people remark 'but she was only a baby when it happened' or 'if we don't mention it he will forget about it', with the belief that this reduces or removes any impact of events. However, trauma can have a serious effect on babies, toddlers and preschool children. In fact, anything that affects older children and adults can also affect very young children. As children are dependent on others for care and safety and their brains and bodies are still developing, they are much more vulnerable to trauma than adults. Events that occur in a young child's life, particularly the first few years, influence their immune system; how they express and manage their feelings; behaviour and stress; how they form relationships; their communication skills; their intelligence and functions like body temperature and hormone production.



The belief that children are not affected by trauma often means when children are traumatised, their feelings may not be acknowledged. Their experiences may be ignored, minimised or not noticed and their behaviour can be interpreted as bad, naughty or intentionally difficult. The effects of trauma can be so overwhelming that children's development is affected (e.g., changes in their language or motor skills). Trauma changes the way children understand their environment, the people in it and how and where they belong. It shapes and affects children's emotions, behaviour, memory and learning capacity.

Knowing about the possible impact of trauma can assist in promoting children's mental health and wellbeing. With a fuller understanding it is possible to make links between children's behaviour and the previous events in their lives. With support, children can recover from the harmful effects of trauma. To do so they need the adults in their lives to be understanding of and responsive to their needs.



Children are more vulnerable to the effects of trauma because of their dependence on adults for their care and safety.

What makes an event traumatic?

Vulnerability to trauma differs between children and depends on a variety of factors, especially a child's age and past experiences. Not all children are affected in the same way by similar events. Both the type of event and the way a child responds to it contribute to the likelihood of them being traumatised by it. One of the influences for how children respond to trauma is the personal meaning they place on the event. This is strongly influenced by their past experiences. The more stressful experiences in a child's life, often known as risk factors, the greater the chance they will be traumatised by future events. Risk factors are events that challenge children's social and emotional wellbeing, such as family conflict or separation or loss of an important person. The more risk factors present in a children's life, the more vulnerable they are to being traumatised by events that may not affect other children. Protective factors such as living in a supportive and nurturing environment assist children to be able to manage stressful events and can decrease the likelihood of ongoing impact, such as mental health and behavioural difficulties, after children have been affected by trauma.

For more information on risk and protective factors, refer to *Component 4: Promoting children's mental health*.

Trauma can impact on all elements of a child's development.



There are a range of events that could be traumatic for children. These can be broken down into five broad areas:

Accidents and falls

Accidents and falls are events that are classified as simple trauma. Falls are common for young children, particularly as they learn to walk, and generally do not lead to any ongoing difficulties. This is part of children developing skills and confidence when learning something new. Children may also have serious accidents and falls such as falling down a set of stairs, off beds and bicycles and out of high chairs. Traumatic responses are more likely to occur with these more serious types of accidents. Near-drownings, such as in bathtubs, backyards or at the beach are also potential triggers for a traumatic response. Other examples include motor vehicle accidents (even at low speed) and being winded after a fall.

Medical and surgical procedures

Medical and surgical procedures are events that can be classified as either simple or complex trauma, depending on the nature and length of the procedure. Invasive medical procedures are one of the commonly overlooked events that can lead to a traumatic response. This response is more likely to occur when children have been separated from their parents or carers and are frightened or are unprepared for what will happen to them. Some examples of these situations include getting stitches or needles, having a physical examination or going to the dentist.

Environmental stresses

Environmental stresses are events that can be classified as either simple or complex trauma. Drought, bushfires, floods and cyclones are some of the common natural disasters that can trigger a traumatic response. Other environmental stresses, such as loud noise, a hot car or a freezing cold room can create a traumatic response in babies and young children who do not have the physical ability to manage these conditions.

Grief and loss

Grief and loss are events that can be classified as either simple or complex trauma. It is common for children to experience some form of loss in their lives, such as the death of a family member or loved pet. Divorce and separation are also frequent experiences that involve grief and loss, affecting one-third to one-half of families in Australia. Other examples are the loss of belongings or the family home after a natural disaster such as flood or fire.

Violent acts and attacks

Violent acts and attacks are events that can be classified as both complex and developmental trauma. Children can be affected by being attacked as well as by watching someone else being attacked. Children are also affected by seeing and hearing violent acts on the television, computer, radio, video games and newspapers. Other examples of violent acts and attacks include bullying, animal attacks, family violence, war and displacement, physical and sexual abuse and neglect.

Experiencing any of the previous events does not necessarily mean a child will be traumatised. The support and relationships a child has, the feeling of safety, the presence of risk factors and the personal meaning attributed to the experience all influence a child's response. It is by closely observing a child's behaviour that parents, carers and staff can begin to notice behaviours that may indicate a child is having a traumatic response and the impact this may be having on their mental health and wellbeing. In these situations additional support and professional help may be needed.

Cultural trauma

The effects of cultural trauma can also impact on children. This includes experiences of stressful migration such as for refugees, past history of trauma such as 'The stolen generation' in Aboriginal and Torres Strait Islanders communities, and the adaptation and resettlement to a new culture. These kinds of experiences remain difficult long after the events that caused them.

'Children need to be made safe and given opportunities to integrate and make sense of their experiences.'¹



¹Department of Human Services, Victoria (2010). *Child development and trauma guide*. Available through www.dhs.gov.au/everychildeverychance or by direct link at www.secasa.com.au/infosheet/Child-development-and-trauma_guide_intro.pdf.



A traumatic stress response: What happens when an event becomes traumatic?

In most children, the brain and nervous system work together, to help make sense of incoming information. Typically, information is received through children's senses, such as sound and sight. Traumatic events often impact the way a child's brain and nervous system work. In response to a traumatic event, chemicals, such as adrenaline, rush through a child's body and it takes a long time for a child to calm down. When this happens it is more likely a child's brain and nervous system will work less effectively at processing information (e.g., memory, concentration, managing feelings). This is called a traumatic stress response.

One sign a child may be experiencing a traumatic stress response is when they behave as if the event is still happening. Traumatic memories are stored differently in the brain compared to everyday memories. They are stored as images and sensations, as well as words and places. They can be triggered by things such as smells, sights, sounds and movement that remind the child of the traumatic event. For example, if it was raining at the time a child was in a car accident, a child might connect rain with the fearful memories of the car accident. When a child relives the traumatic experience they feel stuck in the time of the event—this is called a flashback.

The impact of ongoing trauma

Often when looking for signs of a traumatic stress response, people focus on a single source of trauma rather than collection of circumstances and events. The impact of ongoing trauma can be an accumulation of single repeated events, such as inadequate care, or a number of events such as family violence, verbal abuse or harsh discipline. These experiences reduce the child's feelings of safety, stability and wellbeing and can affect mental health and overall development.

When children suffer from physical, sexual or emotional abuse from someone they trust, such as a family member, neighbour or religious leader, their sense of betrayal, secrecy and shame is overwhelming. Children may develop ways to survive by shutting down their feelings, pushing away memories and stop trusting or believing others will protect them. Even after the stressful or traumatic situation has passed, children may continue to react as if the stress is still occurring.



²Ibid

'When children are traumatised they find it hard to manage their behaviour and calm themselves down.'²

How to recognise a traumatic stress response

Trauma can disrupt the relationships a child has with their parents, carers and staff who care for them at their early childhood service. It may also affect the development of their language skills, physical and social skills and the ability to manage their emotions and behaviour.

There is a wide range of responses to trauma. Generally young children respond to trauma with physical symptoms, like sleep problems or returning to earlier stages in their development such as bedwetting. Young children are not as able to describe how they feel in words and tend to express themselves through play and behaviour (e.g., clinging to parents or carers, sleeping difficulties, nightmares, crying). Sometimes a child will seem to be recovering well, but may then have a delayed response weeks or months later. For these reasons and the rapid changes in young children, it can be difficult to determine if a child under the age of five is experiencing a traumatic stress response. It is by closely observing children, combined with the knowledge parents, carers and staff have of individual children, that the signs of trauma become clearer.

Children can show their distress following traumatic experiences through their play and behaviour.



The effects of trauma on babies and toddlers (birth to around two years)

Babies and toddlers are very dependent on adults to care for them and keep them safe. They need consistent and loving care to help them grow and develop. Changes in their daily routine and disruption to their environment can affect their sense of safety and security. Just like anyone else, when babies and toddlers are exposed to life-threatening or traumatic events they become very scared. They may experience feelings of helplessness, uncertainty about whether there is more danger and a general fear that extends beyond the traumatic event and into other areas of their lives. Babies' and toddlers' fear and anxiety are very real, even though to an adult it can seem out of proportion to the event. They often show their fear through their behaviour (e.g., crying constantly, hitting or appearing frozen) and through physical signs (e.g., sweating, shaking). Babies and toddlers remember events through their senses such as particular sights, sounds, smells and movements.

After babies and toddlers have experienced traumatic events parents, carers and staff may observe:

- ▶ unusually high levels of distress when separated from their parent or carer
- ▶ a look of shock, as if they are frozen and very alert
- ▶ a numb appearance as if they are cut off from what is happening around them
- ▶ difficulty in soothing and decreased interest in play and interactions with parents and carers
- ▶ in babies, increased irritability, crying more often and needing to be held and cuddled frequently
- ▶ in toddlers, showing uncharacteristic aggression, losing language skills or eating skills.

The types of behavioural responses that may be observed in babies and toddlers include:

- ▶ avoidance of eye contact
- ▶ loss of physical skills such as rolling over, sitting, crawling and walking
- ▶ fear of going to sleep, especially when alone
- ▶ nightmares
- ▶ loss of appetite
- ▶ making very few sounds
- ▶ increased crying and general distress
- ▶ unusual aggression
- ▶ constantly on the move with no quiet times
- ▶ sensitivity to noises.



The effects of trauma on preschool children (around three to five years)

Preschool children have not yet developed the idea of permanent loss and believe that what happens can be reversed. Children who have been traumatised will often repeatedly recreate parts of the trauma events in their play. This is different from other forms of play as it is more repetitive, less imaginative and focuses continuously on the trauma. Through play, children attempt to manage their distress, sometimes by changing the outcome of the trauma, other times by repetitively playing out the results of the trauma.

Preschoolers do not predominantly use words to tell others of their experiences. By observing children's behaviour and the way they play, parents, carers and staff can gain clues to how trauma has affected a child. Even though preschoolers may not fully understand their experiences, they can be very sensitive to knowing when things are not right.



After preschool children have experienced traumatic events, parents, carers and staff may observe:

- ▶ new or increased clingy behaviour such as constantly following a parent, carer or staff around
- ▶ anxiety when separated from parents or carers
- ▶ new problems with skills like sleeping, eating, going to the toilet and paying attention
- ▶ shutting down and withdrawing from everyday experiences
- ▶ difficulties enjoying activities
- ▶ being more jumpy or easily frightened
- ▶ physical complaints with no known cause such as stomach pains and headaches
- ▶ blaming themselves and thinking the trauma was their fault.

Types of behavioural responses in children who have experienced trauma that parents, carers and staff may observe include:

- ▶ return of bedwetting
- ▶ speech difficulties
- ▶ stomach-aches
- ▶ under or overactivity
- ▶ difficulties in paying attention
- ▶ fear of darkness, animals, monsters and strangers (beyond what would be expected at this age)
- ▶ loss of appetite or overeating
- ▶ nightmares
- ▶ crying
- ▶ sleeping difficulties
- ▶ unusual aggression
- ▶ repeatedly talking of the traumatic experience
- ▶ nervousness
- ▶ irritability.



Sometimes traumatic events that have affected a child might have also affected a family or community (e.g., divorce, a family leaving the early childhood service). It is important for parents, carers and staff to be aware of their own wellbeing and how they are coping with a traumatic event. When adults are tuned in to their own needs and look after themselves, they are then more able to give children support. It is with the support of parents, carers and staff that children can recover from the effects of trauma. Supportive and caring relationships during tough times help children manage trauma and find ways to recover. By paying attention to children and their behaviour, words and play, parents, carers and staff have opportunities to understand children's experiences of trauma. This understanding helps adults work together to support children recover, feel safe and secure, and develop positive mental health and wellbeing.



A strong connection between children and their parents and carers is critical to children being able to feel safe again.



This resource and further information on the national KidsMatter Early Childhood initiative is available to download at www.kidsmatter.edu.au. The KidsMatter Early Childhood team also welcomes your feedback which can be submitted through the website.



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