

UNDERSTANDING AND SUPPORTING CHILDREN THROUGH TRAUMA



Supporting children during a crisis or trauma is important work, but a one-size-fits-all approach isn't enough. Children are different, both from adults and from each other.

Children think very differently than adults, and at each stage of development they view the world through their own unique perspective. From birth, children have their own sensitivity to change, to unexpected events, and to distress. They respond to dramatic events and stress in their own ways and with differing intensity.

All children are vulnerable, but not equally. A child already grieving over a lost loved one (a person or a pet), a divorce, or a separation may be more vulnerable, as will children who have families in crisis or who are under stress for any number of reasons. Sensitive and empathetic children will also struggle more to come to terms with events that are disturbing.

All children, even babies, will feel the direct effects of a natural disaster or family crisis — the emotional upset in the air and the change in people, places, routines, and rituals. **Supporting children during times of uncertainty and stress begins with knowing the child.**

RELATIONSHIPS ARE THE KEY

The four pillars mentioned earlier — people, places, routines, and rituals — are all important in times of crisis. But people and relationships are the most vital to health and healing. In all situations for adults and children, compassionate, responsive, and reliable care is the most essential component of healing. Children need to know someone will be there NO MATTER WHAT. Whether that person always says or does exactly the right thing at the right moment is less important.

Whether children are able to express it or not, they need the consistent and reliable care of at least one adult. This means they can trust this adult to follow through on commitments, ensure their needs are met, and provide reliable compassion, helping the children manage the burden the trauma has caused. Sometimes this is all an adult can do, especially at first, and it's always the least an adult must do.

COMMON REACTIONS TO TRAUMA AND HELPFUL RESPONSES

Children Under 3 Years Old

UNDERSTANDING	BEHAVIOR	WHAT CHILDREN NEED
<ul style="list-style-type: none">▶ Pick up on the emotional energy of adults around them▶ May understand pain and try to comfort others	<ul style="list-style-type: none">▶ Crying more than usual▶ Clinginess▶ Changes in eating and sleeping habits▶ Listlessness▶ Hyperactivity or aggression▶ Regressive behavior	<ul style="list-style-type: none">▶ Reassurance▶ Physical and emotional affection▶ Predictable routines▶ Peaceful surroundings▶ Limited or no exposure to conversations or news about the event

3-to-5-Year-Olds

UNDERSTANDING	BEHAVIOR	WHAT CHILDREN NEED
<ul style="list-style-type: none">▶ Pick up on the emotional energy of adults around them▶ Some understanding of what is going on▶ Inability to separate fears from reality due to lack of understanding about time, space, and pretend vs. real▶ Want to comfort others▶ Anxiety about abandonment	<ul style="list-style-type: none">▶ Irritability, anxiety▶ Increased clinginess or attention-seeking behavior▶ Need to talk▶ Hyperactivity, aggressiveness, or listlessness▶ Changes in eating and sleeping habits▶ Regressive behavior, such as having toileting accidents▶ Fear of the dark or of being alone	<ul style="list-style-type: none">▶ Reassurance▶ Physical and emotional affection▶ Predictable routines▶ Limited exposure to conversations or news about the event▶ Opportunities to play and reenact situations▶ Time spent in nature, physical exercise, and mindfulness activities▶ Art, music, and sensory experiences

	<ul style="list-style-type: none"> ▶ Behaviors that test adults 	<ul style="list-style-type: none"> ▶ Honest, but age-appropriate, answers to questions ▶ Opportunities to help and feel a sense of control and competence ▶ Time away from the traumatic event ▶ Meaningful bedtime (and other) rituals
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Primary School-Age Children

UNDERSTANDING	BEHAVIOR	WHAT CHILDREN NEED
<ul style="list-style-type: none"> ▶ Understand what is real and permanent ▶ Lack perspective and context ▶ Want to understand and know more ▶ Expect honest answers and details ▶ Can think about what life is like for others ▶ Have realistic fears ▶ Often focus on their immediate circle — what things will happen to them or their family ▶ Interested in rules, justice, and right and wrong 	<ul style="list-style-type: none"> ▶ Nail biting or thumb-sucking ▶ Irritability, whining, clinging ▶ Aggressive behavior at home or school ▶ Competition with younger siblings for parental attention ▶ Night terrors, nightmares, fear of the dark ▶ Avoiding school ▶ Loss of interest and poor concentration in school ▶ Withdrawal from peers 	<ul style="list-style-type: none"> ▶ Normal routines and favorite rituals ▶ A peaceful household (and school experience) ▶ Ample opportunities for time with calm, loving, reassuring adults ▶ Adults who will find out what is on their minds, listen, answer their questions honestly with the details that matter to them, and share their own feelings ▶ Verbal and physical reassurance that you and they will be OK (and acceptance that you and they may be scared and not OK now; may need details about how you will become OK)

<ul style="list-style-type: none"> ▶ Black-and-white thinking ▶ Want to see justice done ▶ Want to help ▶ Interested in examples of heroes/villains ▶ Influenced by peers 	<ul style="list-style-type: none"> ▶ Regressive behavior (reverting to past behaviors) ▶ Headaches or other physical complaints ▶ Depression ▶ Fears about recurring or new disasters ▶ A need to take on more responsibility for the family and care for others 	<ul style="list-style-type: none"> ▶ Knowledge of where the people they love are at any given time ▶ Guided exposure to the news media and adult discussions ▶ Opportunities to talk and play with peers and adults ▶ Opportunities to use art materials or take part in drama to express themselves ▶ Opportunities to be physically active ▶ Acceptance from adults of play and dramatic conversations that reflect the current events in their lives and the feelings associated with them ▶ Relaxed expectations at school or at home during the crisis period ▶ Reassurance at bedtime, including letting the child sleep with you ▶ Recognition of their efforts during the disaster ▶ Opportunities to help others and participate in community efforts ▶ Help predicting and preparing safety
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		<p>measures to be taken in future disasters</p> <ul style="list-style-type: none"> ▶ Opportunities to be away from the situation and respite from the focus on the crisis or tragedy ▶ Honest, but age-appropriate, answers ▶ Role models demonstrating resilience and effectively responding to adversity ▶ Relief from adult expectations and serious situations. Avoid putting adult responsibilities on a child's shoulders, e.g., "You're the man of the family now," "Your mom is counting on you." Instead, help them build their age-appropriate contributions. "Thanks for adding a few more chores to your schedule. It really does help me."
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Teenagers

UNDERSTANDING/FEELINGS	BEHAVIOR	WHAT TEENAGERS NEED
<ul style="list-style-type: none"> ▶ Understand difficult realities ▶ Watch adults' reactions ▶ Peers are very important ▶ Want to help and make a difference 	<ul style="list-style-type: none"> ▶ Appetite and sleep disturbances ▶ Headaches or other physical complaints ▶ Increase or decrease in energy level 	<ul style="list-style-type: none"> ▶ A peaceful household ▶ To know that you are there for them when they need it (and want it) on their terms; this may mean, for example, late at night or after a period of "hanging out" together

<ul style="list-style-type: none"> ▶ Feelings of powerlessness or anxiety ▶ Striving to be independent (during a crisis, this process is often interrupted) ▶ Can develop maturity and resilience through a crisis ▶ Very interested in knowing about the incident (may pore over news coverage) ▶ Avoid media coverage and conversations about the event 	<ul style="list-style-type: none"> ▶ Indifference, withdrawal, or isolation ▶ A reduced sense of a future, loss of optimism ▶ Dark humor, cynicism, or depression ▶ Confusion/poor concentration ▶ Poor performance at school or truancy, fighting, withdrawal, loss of interest, attention-seeking behaviors ▶ Risk-taking behavior or a fear of taking risks ▶ Rebellion in the home, aggressive behavior ▶ Refusal to be cooperative ▶ Emotional detachment 	<ul style="list-style-type: none"> ▶ To know your whereabouts (even if they don't admit it) ▶ Your willingness to engage in serious discussions ▶ To be offered opportunities to talk about feelings — yours and theirs — honestly, but without adults being intrusive and with adults listening rather than lecturing ▶ Acceptance if they don't want to talk to you ▶ Opportunities to talk to other adults, including professionals ▶ Opportunities for them to talk about their feelings regarding natural disasters, the environment, poverty, religion, justice, tolerance, and other social, political, or religious issues ▶ Your best and wisest adult perspectives on serious issues and your acceptance of their views ▶ Time with peers for play and discussion ▶ Opportunities to be physically active
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		<ul style="list-style-type: none"> ▶ Adults who encourage participation in social activities, athletics, clubs, etc. ▶ Opportunities to help others and be involved in the response to a crisis ▶ Group planning for safety measures to be taken in future disasters ▶ Structured but undemanding responsibilities ▶ Encouragement and support to take care of themselves: eating well, sleeping sufficiently, exercising regularly ▶ Temporarily relaxed expectations of performance ▶ Individual attention and consideration when they ask for it ▶ Opportunities to be away from the situation and respite from the focus on the crisis or tragedy ▶ Recognition of their growing competence, maturity, and any of their efforts during the disaster ▶ Opportunities to take responsibility, help others, or improve the environment
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		<ul style="list-style-type: none"> ▶ Help predicting and preparing safety measures to be taken in future disasters ▶ Relief from adult expectations and serious situations. Avoid putting adult responsibilities on a teen's shoulders, e.g. "You're the man of the family now," "Your mom is counting on you." Instead, help them build their age-appropriate contributions. "Our family is stronger because you have taken on some new responsibilities. Thank you."
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30 WAYS TO HELP CHILDREN COPE WITH STRESS

1. Be available.
2. Listen, listen, and listen some more.
3. Be honest and answer children's questions — at their level.
4. Respect differences in children — individual and age based.
5. Encourage consistency, everyday routines, and favorite rituals.
6. Make the environment safe for talking about feelings and thoughts.
7. Expect and allow for all kinds of emotions.
8. Give choices and be flexible — avoid power struggles.
9. Allow a lot of opportunities and different creative media for expression.
10. Encourage activity and play.
11. Support the child's friendships and social network.

12. Be a model as a human being.
13. Hug with permission.
14. Practice patience.
15. Support children — even when they're at their worst.
16. Expect behavior that is typical of a younger child.
17. Expect behavior that is beyond the child's years.
18. Help them live right — eat, rest, sleep.
19. Make bedtime special.
20. Resist overprotection.
21. Don't force conversation and interaction.
22. Understand that playing is a way to grieve and sort through fears and confusion.
23. Attend to their physical symptoms of stress.
24. Reassure the child that he or she is not alone.
25. Set limits on acceptable behavior and enforce them.
26. Remember and avoid, when possible, triggers that will cause distress.
27. Plan family time together.
28. Be available for help if needed.
29. Ensure children have role models who demonstrate resilience.
30. Take care of yourself.

* This list was adapted from "35 Ways to Help a Grieving Child" (The Dougy Center for Grieving Children).

There is no magic formula or single right way to respond to a child in crisis. It is important to know and respect each child's way of coping, even when it is different from our own.

UNDERSTANDING CHILDHOOD STRESS AND TRAUMA

Types of Stress

According to research done and presented by the [Harvard University Center on the Developing Child](#), there are three types of stress.

There is the **normal and positive type of stress** that accompanies everyday events like a doctor's office visit, meeting someone new, or an unexpected change in plans. This stress is normal and good, and is often accompanied by physical responses like a quickening heart rate. It's important to help children through these stressors, but not eliminate them. Children need the chance to develop healthy capabilities to manage these daily stressors. However, when someone is managing a lot of them at once or significant stress is occurring as well, these daily stressors can feel more overwhelming.

Tolerable stress is when a situation happens that causes more pronounced stress, like a moderate natural disaster or the loss of a loved one. It takes a more severe toll but is considered tolerable because it is buffered by supportive adults and otherwise healthy circumstances. The stress may be short or prolonged, but it is specific to the event.

Toxic stress is a prolonged level of stress and can have long-term experienced when a person suffers from things like ongoing abuse, homelessness, food insecurity, mental health issues, or an ongoing threat of or actual violence. This type of stress is persistent and is disruptive to physical and emotional development and can impact overall health.

Trauma

We use the words trauma and traumatic liberally, but in actuality they refer to physical or emotional events that are likely to cause damage. Trauma can happen in something specific like a car accident, the death of a loved one, or something that is pervasive or frequent like homelessness or abuse. The graver the stress, the more likely trauma will occur. Distressingly, statistics tell us one in four children experiences some type of abuse or neglect, which most certainly leads to some level of trauma. Common signs of emotional distress or trauma in children are:

- ▶ **Regression:** Reverting back to more childlike behaviors, e.g., an older child wetting the bed or sucking his or her thumb.
- ▶ **Withdrawal:** A marked decrease in level of engagement in routine social situations, e.g., family dinners, play dates.

- ▶ **Increased challenging behaviors:** A marked increase in challenging behaviors, e.g., tantrums, aggressive play.
- ▶ **Delayed development:** Atypical development in one or more categories, e.g., language use or learning delays, memory issues.
- ▶ **Anger or extreme emotions:** Seemingly unprovoked or inappropriately strong negative emotions that do not match the situation, e.g., emotional outbursts or fighting.
- ▶ **Misreading emotions or intent of others:** Natural tendency to scan for the negative in overdrive, e.g., assuming others are talking about or “ganging up” on you.

BEHAVIOR AS COMMUNICATION

Children experiencing stress or trauma often display behaviors that challenge adults. Without the skills to understand or communicate deep emotional issues, *children's behavior is their primary source of expression*. In fact, many adults never developed these skills or have trouble accessing them in moments of crisis.

The best indicators of distress in children are changes in their behavior. When infants are stressed, they cry. When infants are more stressed, they tend to cry more. They aren't trying to push caregivers' buttons, but are trying to express their needs. When a caregiver doesn't understand this and instead responds angrily or withholds care, they enter into a cycle that can lead to toxic stress.

When supporting children through crisis, watch for behavior that is not typical for the child such as clinginess, regression, or excessive anger.

Remember, not all behaviors or behavioral changes stem from a crisis. All the other aspects of life and development are marching on — adjusting to a new grade or school, friends moving away or changing, parents worried about losing their job, or a teenager not having a date

— all create personal stress that may eclipse societal turmoil.

ADVERSE CHILDHOOD EXPERIENCES (ACES)

The term ACEs is used to identify circumstances (such as death, divorce, homelessness, neglect, or poverty) that would have an adverse impact on children and recognize the cumulative impact. Mental health professionals and pediatricians evaluate children's ACEs to more fully understand individual children's risks and recommend appropriate interventions. For instance, a child who is experiencing neglect is more susceptible to the effects of trauma during a disaster than is a child without any other adverse experiences.

EMOTIONALrecognition AND REGULATION

Some of the most important work throughout life is to understand and appropriately respond to or handle emotions. Emotional regulation happens over time as we mature; it is easy for children to be overwhelmed by their emotions. Children have big feelings with limited ideas of how to handle them. A significant proportion of behavior that challenges adults is a result of children handling emotions in the only way they know how.

This is exacerbated during traumatic and stressful events. Even when there is a more minor change, like a new routine, children can regress and be more prone to difficult behavior. They are doing this to manage their emotions with the tools they have. Regardless of traumatic events, adults can best serve children by helping them learn about their own emotions and how to respond to them, as well as find perspective and build empathy. This skill set will prove invaluable when coping with typical or traumatic life stressors. It can prevent stress from causing too much trauma or can help a child heal from trauma.

BUILDING SOCIAL-EMOTIONAL LITERACY

Ideas include:

Naming emotions: Whether making faces in the mirror, looking at characters in a book, or playing a silly game in a public place, try naming different emotions by looking at facial expressions and body language.

Reading books: Characters in books are an ideal way to study emotions. Talk about their feelings, the expressions they make, and what they should do about their feelings.

Choose books that show a character coping with difficult emotions, such as, “Alexander and the Terrible, Horrible, No Good, Very Bad Day” or “Ira Sleeps Over.”

Play: Through play, children naturally explore real-world phenomena. Working through emotions is a frequent aspect of play. Children can “try them on” and practice how to react. Adults can interject some role-playing or ask thoughtful, provoking questions to prompt children’s thinking.

DIFFICULT EMOTIONS

Difficult emotions like stress, worry, and anxiety are part of the human experience. These are useful emotions and, although uncomfortable, they aren’t always bad. Sometimes they alert us to potentially unhealthy or dangerous situations, or they pressure us to grow. Contrary to popular belief, stress is not always to be avoided. Stress comes with change, even good change like new babies, marriages, promotions, buying a house, vacations, and more.

Similarly, worry and anxiety are emotions that are purposeful. They help us respond appropriately to stimuli. The problem is when we can’t shut these emotions off, don’t have the capacity to respond to them in a way that reduces or resolves them, or respond more profoundly than is needed in a given situation. For children, much of this can be remedied through the patient support of caregivers. However, it is always a good idea to seek professional help with any concerns or questions.

WHEN TO SEEK HELP

Reactions to traumatic events may appear immediately or after several days or weeks. Most of the time, the symptoms detailed above will begin to disappear as the child and family readjust. But for children who experience disaster directly and intensely, or if symptoms accumulate or persist over time, it is wise to seek help outside the family with a counseling service, a religious advisor, a community health center, or through the children’s school. A counselor will talk to your children to help them understand their feelings. Children should not sense any resistance to this type of care. Similar to needing medical care if a twisted ankle isn’t healing, seeking support for mental health is equally important and without shame.