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What parents and caregivers can expect in the long term after a disaster or community trauma

Resource summary

- Children of all ages can be profoundly affected by disasters and traumatic events. Children need special attention and are vulnerable to long-term issues. Caring parents and a stable routine are the main things a child needs to be okay after a traumatic event.
- Parents and carers need to care for their own wellbeing in order to be able to help the children in their care
- The majority of adults and children will see their symptoms decrease gradually over time and eventually resolve.
- Some may need additional support if their symptoms are preventing them from recovering.
- A minority of people may develop post-traumatic stress disorder (PTSD) from the event.
- PTSD is a group of severe symptoms that occur after a traumatic event and continue at a high level for a month or more.

In the months after a disaster or traumatic event, the focus tends to be on rebuilding physical structures (like buildings and schools) and everyone 'returning to normal'; however, it can be very difficult to see everyone around you going back to normal if you or your children are still experiencing difficulty.

It may feel sometimes like people are trying to forget what happened, or don't want to hear about any ongoing consequences. The reality is that even if you don't see it, many of the people around you are still dealing with what happened and may have difficulties for some time yet.

It is common to experience various effects from a traumatic experience for a long time after it happens, even years.



As communities and people resume their usual routines, there can be great opportunities to come together and support each other.

Research shows that a parent's wellbeing and ability to cope are the strongest indicators for children recovering well after a disaster or traumatic event. You are the most important person in your child's recovery and may need additional support if you are also experiencing difficulty.

What can I expect to happen?

It is normal to experience symptoms for some time after a traumatic event. Some people will experience ongoing low-level stress but will be able to manage it with the support of family and friends. Some will have more severe symptoms initially, which lessen over time. Other people will experience continued distress at a high level or worsening over time and they may be at heightened risk of developing mental health difficulties like depression, anxiety, or post-traumatic stress disorder (PTSD).

The difficulties you face after the event is dependent on lots of factors, and particular to your own individual experience of the trauma. For some people, their experiences following the trauma may impact on their recovery. This may be particularly the case for those who experience financial hardship as the result of the disaster,

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are in temporary accommodation and who face difficulties in getting or receiving supplies like medicine or food. Children are also affected by all of these factors.

You may have heard about 'showing resilience' or 'being resilient', but resilience does not mean being strong or unaffected. It is more about being able to recover over time with the right help and support and learning how to manage overwhelming feelings like sadness or anger, which may come back up when you are reminded of the event

What feelings might come up for me or my children?

Many people experience post-traumatic stress after a traumatic event, which is different to PTSD. This is where symptoms occur at a low, manageable level, or only some symptoms occur. Most people will experience different levels of post-traumatic stress rather than clinical PTSD.

Most people know a little about PTSD but it is helpful to understand what this diagnosis actually means. PTSD is a group of stress reactions that can occur after experiencing a traumatic event and continues at a high level for one month or more. These symptoms need to be at a level where they are impacting a person's ability to function significantly to meet the criteria for a diagnosis. It is important to speak to your GP if you have symptoms that have not lessened over time or are getting worse.

Key symptoms of PTSD

Reliving or re-experiencing the event. This can include having flashbacks (like going into a dream when you are awake and losing touch with what is happening around you) or vivid, upsetting memories, intrusive thoughts that constantly interrupt you, and ongoing nightmares or bad dreams that don't get better over time.

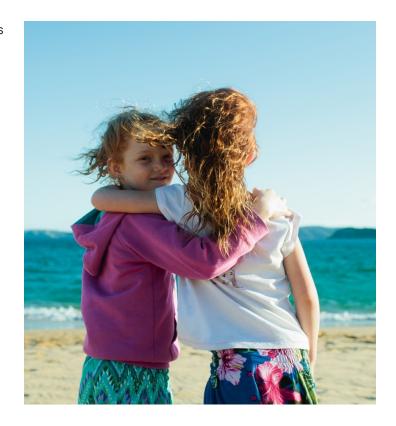
Attempting to avoid reminders of the event or loss.

This can include refusing to go places where you will see people or things that remind you of the event or refusing to speak to people about the event. Reminders can include non-specific signs of danger, like hearing sirens.

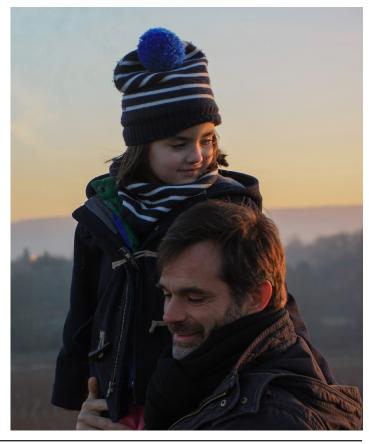
Increased anxiety or feeling like you are constantly 'on guard'. This can include getting startled at small things or feeling like you are 'tightly wound' all the time. It is often harder to sleep, relax, or take in moments around you when you are feeling like you have to constantly be on watch for danger.

Negative mood and negative or unhelpful thoughts.

These can include getting angry at yourself because you could think you could have done something differently, feeling guilty that you survived, feeling like you don't deserve good feelings or experience things you like and enjoy, or feeling things like sadness, shame, fear, or anxiety.



Take note: Sometimes physical symptoms will persist, like experiencing trouble sleeping or unexplained aches and pains, even if you are feeling good otherwise. Physical symptoms are also more likely to happen if you are not coping well and likewise, it can be harder to cope with stress or mental health difficulties if you are injured or sick.



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Considering a child's reaction

Children live and understand their world through a network of family, friends and community. Children's recovery after a traumatic event is directly impacted by the reactions of trusted family members and community supports.

Children are more likely to experience long-term difficulties after a disaster if they:

- had existing vulnerabilities or difficulties at home before the event, such as family violence or other types of conflict
- experienced the disaster personally or felt their life was threatened
- witnessed their parents in danger, or leaving to help others
- experienced challenges or big changes after the event occurred, such as finding a new home, moving town or schools, or had family members struggle with recovery
- were injured during the event or fell sick afterwards
- have a physical, mental, or developmental disability.

Your reaction to the event also affects how you care for your child.

If you are having trouble coping, you may find that you are:

- sometimes withdrawn or unavailable to your child, or don't have time for their worries
- overprotective or telling your child the world is not safe.
- constantly reminding yourself and the people around you, including your children, about the event, or refusing to talk about it entirely.





What can I expect from my children?

Infants and children can be directly affected by trauma no matter their age, but they can also be affected if their parents and family are suffering. Children are also sensitive to what is called 'secondary adversity', which is the name for challenges and changes after a big event, such as moving schools or homes.

Some children will make an effort to be obedient and wellbehaved after a traumatic event and it is only when they feel secure and safe, that the impact of trauma is shown through a variety of behaviours. Children may take up to six months to show signs that they aren't feeling okay.

All children will need help managing things like fears and anxieties about the event, which can continue for a long time afterwards.

The following list gives some examples around possible types of fears your child could have:

Children's fears three years after a bushfire

Even years after a disaster, children can still be affected. In 2003, Canberra experienced a severe bushfire that burned for several days and destroyed many homes. Three years later, researchers asked parents about some of their children's ongoing fears. Among others, some fears were:

- fear of smoke or fear of being alone, resulting in being easily stressed and very emotional
- fear of another fire coming
- frightened by the sound of fire engines
- nervous and restless, especially on hot, windy days or when they can see or smell smoke
- panic reaction to smoke (whatever its source) or the smell of smoke in the air
- always upset when burning off happens because they think a fire will happen again
- concern whenever any of the family are away, such as for work or school camps
- disinterested in going on holiday or being away from home

[Macdonald, Raphael, Woodward & Winkworth in Camilleri et al. (2007)]

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PTSD symptoms by age group

While it is more likely that your child will not develop PTSD, a small minority of children will. Symptoms can be different in children of different ages. For instance, younger children do not always get distressed when experiencing these symptoms. Sometimes they can show nothing or even get excited.

The following symptoms of PTSD are ones that are typically associated with your child's age (the following symptoms do not include the full spectrum of behaviours your infant or child may show):

Babies and young children (0-5)

Young children often do not have the capacity to say how they're feeling and are more likely to act out through behaviours. As a result, sometimes kids who have experienced trauma are thought of as naughty, misbehaving, aggressive or very shy, rather than as suffering the after-effects of the traumatic event. Below are some of the behaviours you may see in your young children that may indicate they need some more support.

Separation anxiety. This is where infants or young children don't want to be alone or without Mum or Dad, are very clingy, or don't want to explore or play with other children.

Getting very upset or distressed, where they may be inconsolable, when reminded of things to do with the event. Things that young children remember about the event can be different from adults, so it may seem like they are getting upset over nothing or 'out of nowhere'.

Trouble sleeping or persistent nightmares. Trouble sleeping can also be because of increased anxiety or fears about the dark or being alone.

New fears or old fears coming back, like fears of the dark or toilet, or fears that seem strange like fear of cars or the playground. Children can associate even non-threatening things with the stress of the event and their fear it may happen again. For example, if you used a car to leave your home, or if the event happened while your child was playing outside, they can associate cars or the playground with the event.

Repetitive play. Children need to watch and do things many times to learn new skills and to integrate new experiences; however, if your child's play repeats itself over many months or even years, and doesn't seem to change or evolve, this can indicate they may be having trouble.

Regression of new skills. Children can sometimes temporarily 'lose' skills that have been recently been developed as a reaction to trauma. They can refuse to use the toilet, stop speaking or speak using limited words instead of sentences.

Middle childhood (6-8 years) and later childhood (9-12 years)

PTSD symptoms in middle childhood (6–8 years) and later childhood (9–12 years) are similar to each other but depend on the child and their circumstances.

Some of the symptoms of PTSD for these children are:

- unexplained illness or aches and pains
- denying the event happened or refusing to talk about it
- remembering what happened in the wrong order or missing parts
- seeing 'signs' that predicted the event or thinking it happened (or will happen again) because of something they did
- an infatuation with disaster preparedness, like having a bag constantly packed and with them, or taking things with them to 'protect themselves'
- difficulty at school, concentrating, or paying attention
- 'playing disaster' or 'playing death' through games, creative expression (writing stories or drawing pictures)
- a lack of positivity or hope for the future. Some children will expect disasters to happen again, or will resist thinking about the future
- choices that are self-destructive or impulsive; destructive or impulsive choices can sometimes come as a response to thinking that the future cannot be positive, so it doesn't matter what they do
- sadness, hopelessness, or despair
- low self-esteem or feeling like others can't be trusted
- behaviours reminiscent of younger children (clinginess, fussiness, not wanting to go to school or be alone, not wanting to toilet or sleep) or much older children (substance use, aggression and fighting, sexual promiscuity, self-harm).



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What about anniversaries and reminders of the event?

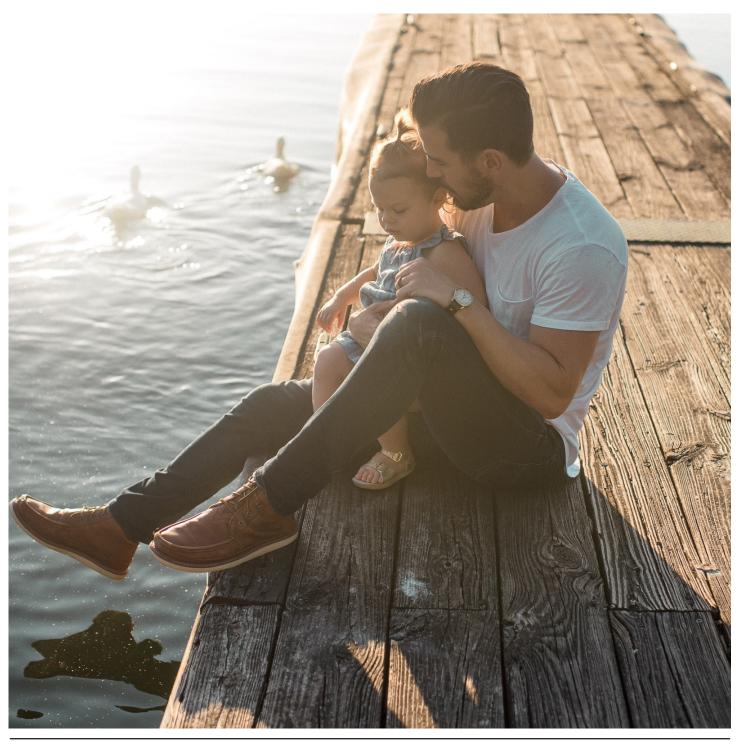
The anniversary of a traumatic event can bring up a lot of feelings for you and your child. It is a reminder of what happened and a chance to reflect on the time since the event and what may happen in the future.

The occasion can bring up a lot of feelings that were also around when the event happened, like sadness at what was lost, anger that it happened, anxiety or fear that it might happen again, or distress at seeing others upset.

Increased media and discussion around 'marking the event' can also bring up overwhelming feelings that you may not want to deal with again. These feelings can be just as strong as they were at the time of the event, even if it has been a long time since it happened.

What should I remember?

If you are worried about you or your children at any time, or you or your children do not seem to be coping well as time passes, please see your GP and seek additional support from those around you.



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