

How parents and caregivers can support children immediately after a disaster or community trauma

In the immediate aftermath of a disaster or community trauma event, there are some key principles you can follow to support your children. These principles are based on the best evidence of what helps children to recover after a frightening or overwhelming event. They are collectively known as 'psychological first aid' (PFA).

Psychological First Aid



PFA is a term used, like physical first aid, to describe strategies to assess and protect people during and immediately after an emergency that threatens their lives or wellbeing.

PFA is an internationally accepted concept and strategy supported by the World Health Organisation (WHO), which has developed specific guidelines for use across the world. Special guidelines have also been developed for children, both by WHO and the National Child Traumatic Stress Network in the USA.

The key components of PFA for children are based on three important concepts:

- 1. Listen and look**
Listen to children's questions or concerns, but also be on the lookout for what their behaviours are showing.
- 2. Protect**
Provide as safe an environment as you can, both physically and emotionally.
- 3. Connect**
Support your children to feel connected to familiar people, places or objects as much as you can.

The immediate aftermath of a disaster can be overwhelming for all members of a community, but focusing on these fundamental ideas can help give you and all members of your family much needed focus and direction to help support your recovery physically and psychologically.

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Reactions to a frightening or overwhelming experience

There are a range of common and expected immediate responses to a frightening or overwhelming experience. Infants and children's immediate reactions may include becoming 'frozen' physically and/or emotionally. It may be difficult for them to be fully aware of what is going on around them. They may also be overly aware of some details that can become magnified for them. They are likely to be deeply afraid and highly anxious.

They may also experience intense physical reactions such as:

- nausea
- heart palpitations
- loss of bowel and bladder control
- out-of-control crying or screaming.

They will have an overwhelming need to feel the protection, safety and comfort of the most important and familiar people in their lives – such as their parents or caregivers, extended family, friends and teachers.

What to do

These practices are aimed at helping children regain a sense of emotional and physical safety, feel protected from the powerful and confronting force of the traumatic event and be comforted and calmed. This allows children to gradually make sense of what has happened. It also limits the potentially damaging effects of the experience and provides the first steps in the recovery process.

Guidelines for what infants and children need

Be there. Children need to be with their parents or carers. If this is not possible, try to keep in touch by phone or email.

Avoid unnecessary separation of children from their parents, carers or siblings. Maintain a calm, non-threatening environment.

Take care of basic health needs including shelter, clean water, warmth, healthy food and rest.

Maintain familiar objects, routines and places.

Explain what has happened and, if possible, what will happen next.



Ways parents and carers can help

Move away from the scene. Remove the child and yourself as much as possible from the sight, sounds, smells and circumstances of the incident. Look for a quiet and settled place with other people around.

Avoid exposure to distressed people, other people's conversations about their experience and media reporting of the incident.

Look after yourself. Understand that even though you are a parent, you are still likely to be experiencing much of the same distress as your child. While you will obviously want to focus on the needs of your child, it is important that you look after yourself and give yourself permission to access support.

Look for some support for yourself so you are better able to understand and help your child. Be mindful of the child's needs and reactions and be responsive to them.

Tell your child that they are safe (when this is the case), that you are with them and that you will look after them.

Comfort your child with the normal comforting actions your child is used to such as cuddling, stroking, holding hands and sitting together. Quiet conversation and singing can also help to reassure them that they will be ok.

Accept the child's responses, reactions and feelings. Don't tell them to 'be good', to 'stop being silly' or to 'be brave'.

Do not make behavioural or emotional demands or have expectations the child might not be able to meet at this particular time.

Allow the child to talk and say what needs to be said. Let them cry, but do not force them to talk. Calming and quiet conversation will help a child to settle and feel safe.

Answer any questions factually, clearly and concisely without unnecessary detail. If you do not have information, say so. Do not make promises which may not be able to be kept or statements that may not be accurate.

Help the child to manage any physical reactions, such as through using slow and steady breathing when they are tense, breathing rapidly or fidgeting.

Connect with something familiar as soon as possible – a person, a place, an object. Familiarity and routine help to establish and maintain recovery.

Play or listen to music if children want to.

Reassure the child that their reactions are normal and will pass in time.

This information is based on a resource originally authored by Ruth Wraith OAM, MCPP.

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