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Helping your child after an accident



If you require this information in this leaflet in a community language or alternative format e.g. Braille, easy read, audio please contact the Equality and Diversity Department at: fife-uhb.equalityanddiversity@nhs.net or phone 01383 565142

What interventions are there for traumatic reactions?

Remember that reactions to trauma are **normal**. There will usually be a period of recovery. Parents or carers are the best people to help a child overcome these reactions. There is lots of helpful information on the suggested websites.

Not all children will need help from a professional. Your GP is the best person to ask if you are worried about your child. A referral can be made to a professional who offers one of the recognised treatments for trauma. These are CBT (cognitive behavior therapy) or EMDR (eye movement desensitisation and reprocessing). See links below for more information.

Useful Links

More Information

<http://www.rcpsych.ac.uk/healthadvice/parentsandyouthinfo/parents/carers/traumaticstressinchildren.aspx>

<http://www.nctsnet.org/resources/audiences/parents-caregivers/parenting-in-a-challenging-world>

<http://www.childtrauma.com/publications/par-info>

Self-help guide for Teens

<http://www.moodjuice.scot.nhs.uk/posttrauma.asp>

Parenting Issues

<http://www.moodcafe.co.uk>

Your child's feelings

Children, as well as teenagers, need more comforting and cuddles than usual after a traumatic event. This helps them to feel safe. Try to spend as much time together playing, or enjoying activities.

Try giving a name to whatever you guess child is feeling, as this makes feelings easier to cope with. Here are some examples:

- 'I know you're feeling sad. It's ok to be sad when something bad happens.'
- 'You must be feeling scared. When something scary happens, it's normal to be upset.'

If your child becomes distressed, give cuddles to provide safety, and remind your child where you are. You can do this by describing your surroundings, so that attention is paid to the present instead of the upsetting memory. A rhythmic sensation helps too, such as gentle patting.

Looking after yourself

Accidents that involve children can involve parents too. There is a chance that you may have been affected too. Your child needs more than ever to rely on adults who care for him or her. If you are struggling for any reason, make sure you get support from family and friends. You can also get support from professionals. Don't worry about being upset in front of your child. Your child needs to know that such reactions are normal, and it's a good way to learn how to cope with distress.

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How can your child suffer trauma?

A traumatic event leads a child to believe that the world is unsafe and unpredictable. It is important to keep to normal routines as much as possible. This helps your child regain feelings of safety and security and reduces moodiness and fearfulness.

It's tempting to become lax about routines when your child has suffered. But after the first few days, it's important to stick to normal routines about things like bedtime and going to school.

When a child is anxious about things that are reminders of the accident, there are a number of things you can do to help:

- ◆ Avoid waiting too long before tackling any fears. Usually the longer a child avoids something, the harder it is to get back to normal.
- ◆ Try getting back to normal gradually. For example, if your child is scared to get in a car, suggest sitting in a stationary car with the door open, until it feels better. The next step might be to close the door, and then to drive a short distance. Let your child suggest what the gradual steps might be.
- ◆ Help your child to notice what's different about the situation that is scary. Usually children just notice things that are similar to the accident. For example, point out that the car driver is being extra careful.
- ◆ Teach your child how to stay calm by showing how you do it, or by helping your child to breathe slowly, or by distracting him or her.*
- ◆ Make sure that you focus on what your child is doing well and try not to show any frustration you might feel.

**There are lots of ideas about how to stay calm and manage feelings on the suggested websites.*

Making it easier: telling the story

Children, especially younger children, need to make sense of what happened. Parents often avoid talking about the event because they worry that it might cause upset. Often children avoid talking too as they worry about upsetting their parents! In fact, talking is the best way to help a child overcome trauma. It's normal to be upset, and this is part of recovery.

Telling the 'story' about a traumatic event helps a child learn that it's just a memory, and not something that always feels scary. Give your child lots of chances to talk about what happened, even if your child doesn't seem interested at first. If a child finds talking difficult, encourage them to think about the event through play and drawings. This may need to happen many times.



You can help your child write or tell a story about the accident. Make sure it has a happy ending, involving the good things that your child is doing now. It's a good idea to include all of the senses in the story, so that your child thinks about what they heard, felt, smelled and tasted, as well as what they saw or thought. This may have to be a gradual process, telling the story bit by bit with lots of comforting. This means your child only has to cope with a little at a time. You will also find out if you need to explain anything your child hasn't understood. Be honest as much as possible and use words that your child can understand.

Making it easier: normal routines

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What happens during a traumatic event?

A memory of any event is stored in the brain and is connected to other similar memories. We fit memories together and put them in an order that makes sense. We remember what we saw, heard or felt. If a memory store of good memories looked like a chest, the things inside it would be neat and tidy, and the lid would fit properly.

When a frightening event occurs, we don't have time to think about what to do. The thinking part of the brain 'shuts down' so that we can react instinctively to try and keep safe. This is a normal and helpful way for the brain to react in dangerous situations. But it means that the experience is 'stored' in its raw state with its upsetting feelings. The thinking part of the brain may not get a chance to 'process' what happened, because it's too upsetting to think about.

A traumatic memory is like pieces of a jigsaw which don't make sense. If the memory store of these experiences looked like a chest, it would be disorganised and untidy, and the lid would not shut properly. Sometimes something happens to remind us of the event (like going

near where it happened). Then what



we saw, heard, smelled, tasted, felt or thought comes tumbling out. It's natural to try to close the lid quickly, because it's like reliving the event. We avoid things, places or activities that are reminders. All of these reactions are **normal**, and have helped humans to survive danger in our past.

If, for some reason, we are not able to think about what happened, and the pieces of the jigsaw never get a chance to fit together, the memory stays raw and continues to be upsetting.

How do children react to trauma?

Children's reactions to trauma are usually seen as changes in their behaviour. These changes vary depending on age. Children are not as good as adults at talking about how they feel. Your child may be affected by an accident even if he or she does not or cannot tell you. Parents or carers can miss making a link between an accident and behaviour changes because:

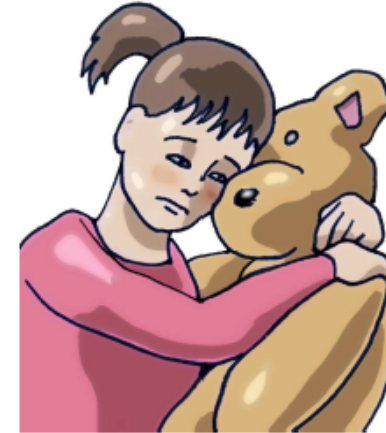
- The changes happen gradually
- The child did not seem upset at the time of the accident
- The changes begin weeks or months after the accident
- The child is too young to talk

There are 4 types of changes you might notice:

- **Increased alertness, because: 'If I've been in danger I'd better look out for it.'** Your child is jumpy, irritable, angry, agitated, impulsive, or startled by sudden, loud or unfamiliar noises. Your child may have difficulty concentrating or eating. Your child is more 'clingy'.
- **Avoidance, because: 'It's better for me to avoid something that was dangerous.'** Your child doesn't want to go near the place where the accident happened. Your child may be afraid of situations similar to the accident.
- **Reliving, because: 'The memory is still raw and/or can't make sense of it.'** Your child has difficulty getting to sleep, or has nightmares. Young children may want to tell the story of the accident again and again. They may play it out with toys or in drawings. A child may get sudden 'pictures' of the event, which can be scary if he or she doesn't know why they are happening.
- **Numbness, because: 'If the world is too dangerous, I'd better shut myself off from it.'** Your child doesn't want to go out, is unwilling to try new or even favourite activities. It may look like your child doesn't feel anything. He or she may start acting younger, or lose skills, such as staying dry at night.

What does normal recovery look like?

If you know how your child might react after an accident, you're in a good position to help. It's normal for your child to show any or all of these changes. The natural course of recovery means that your child tries to make sense of what happened. Children try to overcome any fear, helplessness or terror. Young children often go over what happened (sometimes repeatedly). Older children might want to talk about it bit by bit or over and over again. A child may choose not to talk. Your child will need lots of support, patience and understanding in the weeks after an accident.



It's normal for your child to experience some distress. Children may be affected for around a month after the event. Your daily routine may become difficult to manage. This could be due to your child having frequent nightmares or avoiding situations that make it hard to carry on with normal life, such as refusing to travel in a car after a road traffic accident. If these difficulties continue more than one month after the accident, or show no signs of getting better, you may wish to seek further help through your GP.