
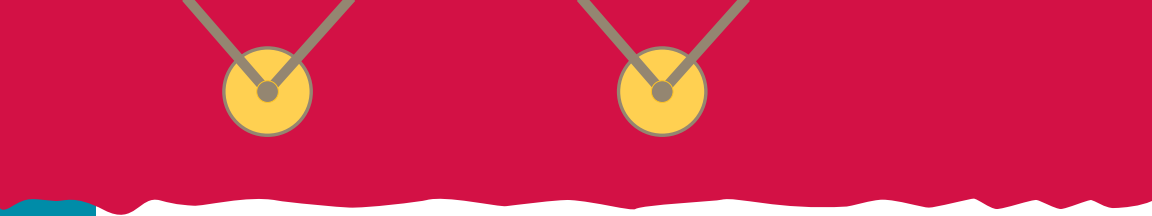


Helping Children and Adolescents
Cope with Violence and Disasters

For Teachers, Clergy, and Other Adults in the Community

What Community Members Can Do

From the National Institute of Mental Health



Violence or natural disasters can cause trauma in young people. Trauma is hurt or harm. It can be hurt to a person's body. It can be harm to a person's mind. The National Institute of Mental Health (NIMH) works to help children who experience trauma. Other Federal agencies also provide help.

Community members play important roles. They help children who experience violence or disaster. They help children cope with trauma. They help protect children from further trauma. They also help young people avoid or overcome emotional problems. These problems can result from trauma.

This fact sheet provides steps community members can take. It gives information on:

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Coping with Trauma After Violence and Disasters

Disasters cause major damage. Hurricanes Katrina and Rita were examples. They occurred in 2005. Many homes were destroyed. Whole communities were damaged. Many survivors were displaced. There were also many deaths.

Trauma is also caused by major acts of violence. The September 11, 2001 terrorist attacks were examples. Another example was the 1999 shootings at Columbine High School in Colorado. The Oklahoma City bombing in 1995 was also an example. These acts claim lives. They also threaten our sense of security.

Beyond these events, children face many other traumas. Each year, young people are injured. They see others harmed by violence. They suffer sexual abuse. They lose loved ones. Or, they witness other tragic events.

Children are very sensitive. They struggle to make sense of trauma. They also respond differently to traumas. They may have emotional reactions. They may hurt deeply. They may find it hard to recover from frightening experiences. Young survivors of trauma may need extra support. Teachers, religious leaders and other adult helpers can provide effective support. This may help children resolve emotional problems.

What is Trauma?

There are two types of trauma – physical and mental. Physical trauma includes the body's response to serious injury and threat. Mental trauma includes frightening thoughts and painful feelings. They are the mind's response to serious injury. Mental trauma can produce strong feelings. It can also produce extreme behavior; such as intense fear or helplessness, withdrawal or detachment, lack of concentration, irritability, sleep disturbance, aggression, hyper vigilance (intensely watching for more distressing events), or flashbacks (sense that event is reoccurring).

A response could be fear. It could be fear that a loved one will be hurt or killed. It is believed that more direct exposures to traumatic events cause greater harm. For instance, in a school shooting, an injured student will probably be more severely affected emotionally than a student who was in another part of the building. However, second-hand exposure to violence can also be traumatic. This includes witnessing violence such as seeing or hearing about death and destruction after a building is bombed or a plane crashes.



Helping Young Trauma Survivors

Helping children begins at the scene of the event. It may need to continue for weeks or months.

Most children recover within a few weeks. Some need help longer. Grief (a deep emotional response to loss) may take months to resolve. It could be for a loved one or a teacher. It could be for a friend or pet. Grief may be re-experienced or worsened by news reports or the event's anniversary.

Some children may need help from a mental health professional. Some people may seek other kinds of help. They may turn to religious leaders. They may turn to community leaders.

Identify children who need the most support. Help them obtain it. Monitor their healing.



Identify Children Who:

- Refuse to go places that remind them of the event
- Seem numb emotionally
- Show little reaction to the event
- Behave dangerously

These children may need extra help.

In general adult helpers should:

Attend to children

- Listen to them
- Accept/ do not argue about their feelings
- Help them cope with the reality of their experiences

Reduce effects of other stressors like

- Frequent moving or changes in place of residence
- Long periods away from family and friends
- Pressures at school
- Transportation problems
- Fighting within the family
- Being hungry

Monitor healing

- It takes time
- Do not ignore severe reactions
- Attend to sudden changes in behaviors, language use, or in emotional/feeling states

Remind children that adults

- Love them
- Support them
- Will be with them when possible.

How Community Members Can Help

After violence or disaster community members should:

**Identify and address their own feelings –
this will allow them to help others**

Allow children to

- Express feelings
- Discuss the event
 - Before going back to routines
 - But not if children don't want

**Use their buildings and institutions as gathering
places to promote support**

**Help people identify resources available to
provide assistance**

**Emphasize community strengths and resources
that sustain hope**

Children are very sensitive.

They struggle to make sense of trauma.

Be sensitive to

- Difficult behavior
- Strong emotions
- Different cultural responses

Get mental health professionals to

- Counsel children
- Help them see that fears are normal
- Offer play therapy
- Offer art therapy
- Help children develop
 - Coping skills
 - Problem-solving skills
 - Ways to deal with fear
- Hold parent meetings to discuss
 - The event
 - Their child's response
 - How help is being given to their child
 - How parents can help their child
 - Other available support





Help for all People in the First Days and Weeks

Key steps can help adults cope. Adults can then provide better care for children. Create safe conditions. Be calm. Be hopeful. Be friendly. Connect to others. Be sensitive to difficult people. Encourage respect for adult decision-making.

In general help people:

- Get food
- Get a safe place to live
- Get help from a doctor or nurse if hurt
- Contact loved ones or friends
- Keep children with parents or relatives
- Understand what happened
- Understand what is being done
- Know where to get help
- Meet their own needs

Avoid certain things

- Don't force people to tell their stories
- Don't probe for personal details
- Do not say
 - “Everything will be OK.”
 - “At least you survived.”
 - What you think people should feel
 - How people should have acted
 - People suffered for personal behaviors or beliefs
 - Negative things about available help
- Don't make promises that you can't keep
(Ex: “You will go home soon”).

How Children React to Trauma

Children's reactions to trauma can be immediate. Reactions may also appear much later. Reactions differ in severity. They also cover a range of behaviors. People from different cultures may have their own ways of reacting. Other reactions vary according to age.

One common response is loss of trust. Another is fear of the event reoccurring. Some children are more vulnerable to traumas. Children with mental health problems may be more affected. Children with experience of other traumas may be more affected.

Children's reactions to trauma can be immediate or may appear much later.



Children Age 5 and Under

Children under five can react in a number of ways:

- Facial expressions of fear
- Clinging to parent or caregiver
- Crying or screaming
- Whimpering or trembling
- Moving aimlessly
- Becoming immobile
- Returning to behaviors common to being younger
 - Thumb sucking
 - Bedwetting
 - Being afraid of the dark

Young children's reactions are strongly influenced by parent reactions to the event.

Children Age 6 to 11

Children in this range may:

- Isolate themselves
- Become quiet around friends, family, and teachers
- Have nightmares or other sleep problems
- Become irritable or disruptive
- Have outbursts of anger
- Start fights
- Be unable to concentrate
- Refuse to go to school
- Complain of physical problems
- Develop unfounded fears
- Become depressed
- Become filled with guilt
- Feel numb emotionally
- Do poorly with school and homework.



Adolescents Age 12 to 17

Children in this range have various reactions:

- Flashbacks to the event (flashbacks are the mind reliving the event)
- Avoiding reminders of the event
- Drug, alcohol, tobacco use and abuse
- Antisocial behavior i.e. disruptive, disrespectful, or destructive behavior
- Physical complaints
- Nightmares or other sleep problems
- Isolation or confusion
- Depression
- Suicidal thoughts

Adolescents may feel guilty. They may feel guilt for not preventing injury or deaths. They also may have thoughts of revenge.

More About Trauma and Stress

Some children will have prolonged problems after a traumatic event. These may include grief, depression, anxiety and post-traumatic stress disorder (PTSD). Children may show a range of symptoms:

- Re-experiencing the event
 - Through play
 - Through trauma-specific nightmares/ dreams
 - In flashbacks and unwanted memories
 - By distress over events that remind them of the trauma
- Avoidance of reminders of the event
- Lack of responsiveness
- Lack of interest in things that used to interest them
- A sense of having “no future”
- Increased sleep disturbances
- Irritability
- Poor concentration
- Be easily startled
- Behavior from earlier life stages.



Children experience trauma differently. It is difficult to tell how many will develop mental health problems. Some trauma survivors get better with only good support. Others need counseling by a mental health professional.

If, after a month in a safe environment

- Children are not able to perform normal routines
- New symptoms develop

Then, contact a health professional.

Some people are more sensitive to trauma.

Factors influencing how one may respond include:

- Being directly involved in the trauma, especially as a victim
- Severe and/or prolonged exposure to the event
- Personal history of prior trauma
- Family or personal history of mental illness and severe behavioral problems
- Lack of social support
- Lack of caring family and friends
- On-going life stressors such as moving to a new home, or new school, divorce, job change, financial troubles.

Some symptoms may require immediate attention.

Contact a mental health professional if these symptoms occur:

- Flashbacks
- Racing heart and sweating
- Being easily startled
- Being emotionally numb
- Being very sad or depressed
- Thoughts or actions to end life.

For More Information

Visit the National Library of Medicine's MedlinePlus Web site at

<http://medlineplus.gov>

En Espanol, **<http://medlineplus.gov/spanish>**.

For information on clinical trials

NIMH supported clinical trials

<http://www.nimh.nih.gov/health/trials/index.shtml>

National Library of Medicine Clinical Trials Database

<http://www.clinicaltrials.gov>

Clinical trials at NIMH in Bethesda, MD

<http://patientinfo.nimh.nih.gov>

Information from NIMH is available in multiple formats. You can browse online, download documents in PDF, and order materials through the mail. Check the NIMH Web site at **<http://www.nimh.nih.gov>** for the latest information on this topic and to order publications. If you do not have Internet access please contact the NIMH Information Center at the numbers listed below.

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TTY Toll-free: 866-415-8051

Fax: 301-443-4279

E-mail: **nimhinfo@nih.gov**

Web site: **<http://www.nimh.nih.gov>**

The list below includes other government agencies that may have additional information on helping children and adolescents cope with violence and disasters:

Center for Mental Health Services

Emergency Services and Disaster Relief Branch
5600 Fishers Lane, Room 17C-20
Rockville, MD 20857
E-mail: info@mentalhealth.org
Web site: <http://mentalhealth.samhsa.gov>

US Dept of Education

400 Maryland Avenue, SW
Washington, DC 20202
Phone: 1-800-USA-LEARN
TTY: 1-800-437-0833
E-mail: customerservice@inet.ed.gov
Web site: <http://www.ed.gov>

US Dept of Justice

950 Pennsylvania Avenue, NW
Washington, DC 20530-0001
E-mail: AskDOJ@usdoj.gov
Web site: <http://www.usdoj.gov>

Federal Emergency Management Agency

(Information for children and adolescents)
P.O. Box 2012
Jessup, MD 20794-2012
Phone: 1-800-480-2520
Web site: <http://www.fema.gov/kids>

National Center for Post Traumatic Stress Disorder

Phone: (802) 296-6300
E-mail: ncptsd@va.gov
Web site: <http://www.ncptsd.va.gov>

**Uniformed Services University of the Health Sciences
Center for the Study of Traumatic Stress**

4301 Jones Bridge Road

Bethesda, MD 20814

Phone: (301) 295-2470

Web site: <http://www.centerforthestudyoftraumaticstress.org/factsheets.shtml>

**National Resource Center for Child Traumatic Stress Network
Duke University**

905 W. Main Street, Suite 25-B

Durham, NC 27701

Phone: (919) 682-1552

Fax: (919) 667-9578

Web site: <http://www.nctsn.org>

E-mail: info@nctsn.org

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