

RECOGNIZING THE IMPACT OF CHILDHOOD TRAUMA

Consider the developmental stage of the individual when traumatized:

Inadequate or incomplete achievement of developmental tasks often occurs in the wake of trauma. This is true for the child as well as siblings impacted by the trauma. It is therefore essential to consider the developmental stage the person was in when the event or injury occurred as the developmental task of that stage may have been partially or inadequately mastered. The development of the human personality and psychology is similar to the building of a house. In the building of a house, the care with which the foundation is laid will determine the solidness and the structural strength of the completed house. All parts of the house rest on the foundation, just as all parts of the personality are built on the sequential developmental stages of childhood and adolescents.

Unresolved trauma and traumatic loss often present as:

- Depression
- Anxiety disorders
- Obsessional thinking and compulsive behaviors, perfectionism
- Alcohol and Substance abuse and inappropriate dependence
- Problems with intimacy such as social isolation, abusive relationships, inappropriate control in relationships, problem with boundaries
- Sleep disturbance—difficulty falling asleep, staying asleep, early awakening
- Eating disorders—*anorexia, bingeing, bulimia, overeating*
- Psychosomatic illness—such as headaches, peptic ulcers, etc
- Aggression, hostility, irritability, difficulty managing anger, controlling behaviors
- Risk taking behaviors
- Failure to emancipate, failure to take responsibility, running away, etc.
- Regressive behavior such as thumb sucking and baby talk.

Recognizing fear and its roots in trauma:

It is the trapped fear that is at the root of post traumatic stress symptoms (see accompanying handouts). Common fears of children after trauma are described by Lenore Terr, MD in *Too Scared to Cry: How Trauma Effects Children and Ultimately Us All*.

These common post trauma fears are:

- Fear of another more frightening event
- Fear of separation
- Fear of death
- Fear of helplessness
- The mirror image of extreme rage is extreme passivity—both are fear based

It is often unresolved fear that unconsciously drives a trauma survivor's life and the resolution of fear is therefore essential to recovery and healing.

Balance Point, Inc. Megan Bronson RN, MSN, CS © 2004

TRAUMA RESPONSES IN CHILDREN AND ADOLESCENTS

Any life-threatening event, which a child experiences or witnesses, can be defined as traumatic. Is your child experiencing post trauma symptoms? Review the following checklist and mark all behaviors that apply.

Common indication of trauma in young children (2-6 years old)

- Hyperactivity (high level of activity, seems out of control, can't slow down)
- Fear, anxiety, nightmares, night terrors, fear of going to sleep or sleeping alone.
- Regressive behaviors, (bed-wetting, talking baby talk, thumb sucking, whining)
- Repetitive trauma play (playing out the accident or fire over and over again), children this age may not be able to use words to talk about the trauma so it is expressed in play.
- Confusion and difficulty understanding that the trauma is over.
- Attachment anxiety, (clinging, lots of worry about parent leaving).
- Physical symptoms, (stomachaches, headaches, other physical symptoms).
- Personality changes; may be withdrawn and passive, or aggressive and reckless.
- School difficulty, such as difficulty concentrating may not want to go to school.
- Arguing, fighting, agitated, restless, quick to anger and becomes defensive.

Common indications of trauma in older children (6-12 years old)

- Fears are more specific and related to the trauma.
- Sleep disturbance, (nightmares, fears of sleeping alone).
- Obsessing about and talking about the trauma repeatedly, compulsive behaviors.
- Guilt related to not being able to control the trauma.
- Impaired ability to concentrate, focus, problem-solve, and learn.
- Changes in behavior, (such as withdrawn and isolating, or aggressive and reckless).
- Feeling overwhelmed by and afraid of losing control of feelings, moody.
- Concern for the safety of family members.
- Fear of death and sometimes a fear of spirits or ghosts.

Common indications of trauma in adolescents (12-18 years old)

- May include symptoms of older children, as well as adult symptoms.
- May be self-conscious about feelings, fears, and being different.
- Aggressive, destructive, self-destructive, risk taking, acting out behaviors, (substance abuse, sexual acting out, delinquent behavior, truancy, etc.).
- Avoidance of interpersonal relationships, withdrawal, social isolation (doesn't want to be around friends, family or favorite activities).
- Personality changes, depression, apathy, moodiness.
- Leaving school or leaving home, or fear of separating from family/parents.
- Pessimism, cynicism, plans of revenge.
- Failing grades, disinterest in school, friends, and previously enjoyed activities.

If your child has any of these symptoms, contact your physician or counselor and bring this checklist to them. Help now can prevent problems later on.

Megan Bronson RN, MSN, CS., Helping Children Heal the Effects of Loss and Trauma After Burn Injury,
A guide for parents and caregivers, the Phoenix Society for Burn Survivors, 2003, pp. 14-15