

References / additional resources:

- National Child Traumatic Stress Network www.nctsn.org
- Substance Abuse and Mental Health Services Administration (SAMHSA) 24/7 helpline 1-800-985-5990
- <https://disasterdistress.samhsa.gov>
- Kidshealth <https://kidshealth.org/en/parents/trauma-a-care>
- National Institute of Mental Health (NIMH) Coping with Traumatic Events www.nimh.nih.gov/copingwithtrauma
- On Our Sleeves www.onoursleeves.org



Disclaimer: PAWNY is a professional organization and not a clinical or health care practice. Please visit www.pawny.org and review the “Find a Psychologist” section of the website to locate potential referral options

To find mental health treatment in Buffalo:

- Best Self 716-884-0888 www.bestselfwny.org
- Crisis Services 716-834-3131 or www.crisistextline.org
- Spectrum Health and Human Services 716-566-6506
- Spectrum CARES mobile crisis team open 24/7 (for youth under age 18 in Erie County) 716-882-4357
- ECMC help center 716-898-1594
- Kaleida outpatient Children’s Psychiatry Center, intake 716-859-5460
- NY Project Hope line crisis counseling 1-844-863-9314



Please visit the following website to complete a brief screener to get help in deciding whether your child needs additional support at this time:

<https://screening.mhanational.org/screening-tools/youth/?ref>

Guide to Understanding Trauma in Children and Adolescents



Trauma is an emotional response to terrible events or situations such as accidents, violence, or natural disasters.

Traumatic responses in children can be caused by:

- Natural disasters
- Community violence / gun violence
- Physical, sexual, emotional abuse or neglect, or witnessing any of these
- Impact of homelessness / poverty
- Racism / systemic racism
- Loss of, or extended separation from parent/caregiver
- Serious illness, accidents, or hospitalization
- Refugee or war experiences

Important considerations include:

- Trauma can disrupt a child's sense of safety and stability
- Not all people will react to a traumatic event in the same way
- A range of reactions is normal, including:
 - Physical/somatic (report of aches/pains) symptoms
 - Regression (a backwards trend in skills - communication, academic, social, etc.)
 - Difficulty sleeping
 - Difficulty functioning in school
 - Changes in emotional expression
- What you can provide a child:
 - Reassurance
 - Explaining to the child what happened is not their fault
 - Spending extra 1:1 time
 - Encouraging discussion of what happened
 - Continuing to follow routines
 - Limit their exposure to repetitive news coverage of traumatic events
- Take note of any serious changes in behavior or emotions
- Point out examples of helpers in the community
- Adults should be sure to take good care of themselves, including any emotional needs that arise

- Seek professional help if needed, particularly if difficulties persist more than one month after event
- Trauma can have long term health consequences and may need professional care

Possible responses to trauma, by age group:

Infancy /early childhood /preschool (0-4)

- Clinginess, tearfulness or resisting separation from caregivers
- Tantrums or disruptive behavior
- Increased fearfulness, nightmares. Fears can extend beyond the traumatic event
- May reenact trauma through play, possibly in a repetitive fashion
- Regression / loss of skills (speech, toileting)
- will not understand death as permanent

School age (5-12)

- Social withdrawal or isolation
- May blame themselves - sense of guilt or shame
- Difficulty concentrating or paying attention in school
- Fears or avoids reminders of the traumatic event, or often retells of the traumatic event

- Increase in safety concerns, obsessed with danger
- May pay close attention to reactions of adults around them
- Can seem dissociated (mentally separating or “shutting down” - more likely with complex, chronic trauma)

Adolescents (10-17)

- Feelings of anger or resentment, shame and guilt
- Possible revenge fantasies regarding event
- Significant changes in relationships
- May feel self conscious about their emotional responses to the event
- Use of alcohol, drugs
- Noticeable change in attitude about the future
- Disruptive, destructive (eating disorders, self harm) or ‘disrespectful’ behavior (a way of expressing distress)