



Registered Charity No. 1144506

Supporting the Psychological Health of Primary School Children Exposed to a Traumatic Incident.

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Children who are exposed to an acutely fearful or distressing situation where there is threat to life or serious injury, either directly or indirectly, may be considerably psychologically impacted.

Some signs that children display indicating they have been affected include experiencing repeated memories of the incident, difficulty sleeping, sometimes with nightmares and intense anxiety when faced with places, people or things related to the incident with a desire to avoid these at all costs. They may be easily startled, agitated, and revert to behaviours that they carried out when they were younger, particularly comfort behaviours such as, for example, sucking their thumb.

The symptoms described above are related to a psychological difficulty called post-traumatic stress disorder (PTSD) that can arise following trauma exposure. Whilst PTSD symptoms may be part of normal recovery, if children still have significant symptoms by 3 months, they may benefit from psychological assessment and intervention. It is believed that around 10-20% of children and young people experience PTSD after exposure to a single incident of extreme trauma.

A key factor associated with improved psychological recovery is the extent to which children and young people feel supported by those around them. Parents, carers, and educators therefore play a key role in responding to the child or young person's needs. It is also important that the adults who are also managing their own distress, either because they were involved in the same trauma or are relating to the child's trauma get some psychological support themselves.

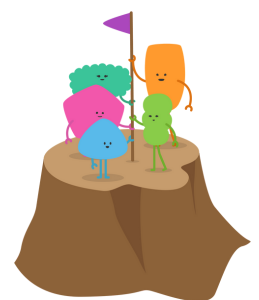
The following information provides some guidance on steps adults supporting a child or young person experiencing post-traumatic distress can take. Since the age and experience of the child or young person is relevant, each section is also broken into developmentally appropriate responses.

Developing confidence in supporting a child or young person who is distressed is very helpful since there is no right or wrong way to support a child or young person, the tips provided are there for you to adapt to your child or young person's individual needs as well as what works within the family and/or school system. Regular care, secure attention, accepting vulnerability, exploring inner strengths and a focus on safety will provide children and young people with the tools they need to make psychological recovery from trauma.

Yours faithfully,



Dr. Nihara Krause MBE
Consultant Clinical Psychologist



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Introduction

Traumatic events are shocking in their suddenness, and overwhelming in terms of how out of the ordinary and frightening they are.

When supporting a child or young person, some **key factors** to keep in mind are:

→ AGE

- How old they are. Younger children have fewer coping skills, cognitive understanding and can therefore be more vulnerable.

→ FREQUENCY

- Whether this is their first traumatic experience or whether they have experienced others in the past.
- Whether they have experienced the same/similar type of trauma.
- Repeated frequency or similarity increases vulnerability.

4 → RELATIONSHIPS

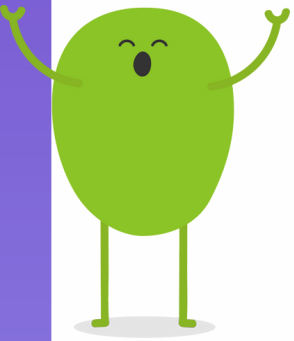
- The support they get from trusted adults in their lives is one of the strongest resilience factors.
- When they receive support and what type of support is relevant and sensitive to their needs.
- Whether there has been a bereavement in the family and their experience of this loss. Grieving is part of the healing process.
- The relationship they may have had to the person or people most directly impacted by the trauma.

→ INDIVIDUAL ATTRIBUTES OF THE CHILD OR YOUNG PERSON

- Cognitive capability, confidence, sensitivity, a previous history of anxiety can contribute either positively or negatively to adjustment.
- Whether the incident occurred at a stressful time in their life, making them more vulnerable to a stronger stress response.
- How much danger they were in, their perception and interpretation of the incident and the amount of fear experienced as a result. This is possibly one of the strongest indicators of potential PTSD.
- Neurodevelopmental status and pre-existing mental health conditions make processing and adjustment harder.

General tips:

Immediate responses:



- The first response is always physical, to make sure they are not injured or in shock.
- If they are in shock but not injured, constant comfort and reassurance is key.
- Tend to basic physical needs. For example, keep them hydrated since they may lose their appetite.
- They may appear to be non-responsive and therefore 'adjusted' to what's happened. This might be due to emotional numbness experienced with shock. Be aware and ready to respond when their shock wears off.

Ways to make children and young people feel emotionally safe:



- Show them affection in ways that matter to them. If you are a tactile family, provide them with lots of hugs and cuddles. If you are a 'doing things together' family, keep family routines and rituals the same.
- Be with them, more regularly than usual.
- Make sure your child or young person has other people they feel safe with around them, so that they have a network of support and you also get a break.
- Create a safe space for them to be in. Some age-appropriate tips are provided in the following pages.
- Help them at night by providing them with as much comfort as possible.
- Keep routines the same as best is possible. Routines help children and young people feel safe.
- Manage adult responses. Age relevant tips provided in the following pages.

Ages 3-5 years

Children of this age may show their trauma by:

1. New or increased clingy behaviour.
2. Changes in basic skills such as toileting, sleeping, often regressing to a young age (for example, bed wetting).
3. They may show variable mood changes which include increased activity or tantrums, tearful or be withdrawn and listless.
4. They may present with a fear of things they didn't have before.
5. They may talk, draw, or act out what happened.
6. They may be delayed in reaching a developmental milestone.
7. They may repeat the incident in imaginary play or with their toys.

Things adults can do to help:

- Provide as much physical reassurance as they feel comfortable having/are used to.
- Reassure them that the event is over. Repeat this as many times as is needed.
- Help identify and express emotions through drawings, animations they may watch.
- Make allowances for regressed behaviour by providing an explanation and an alternative if there is one. For example, you could say 'Sometimes when we are upset, we can wet the bed. Let's try and get that upset out by talking/playing before we sleep tonight.'
- Distraction is helpful for children of this age. Play games with them and provide self-soothing strategies.
- Avoid punishing 'acting out' behaviours but maintain boundaries. Help give them words, comfort them and provide alternative behaviours. Keep boundaries. For example, you could say, 'Hitting your sister is not acceptable, but showing you are feeling upset is. Can you show teddy how to be upset? I will help.'
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- Keep boundaries that have been already established. Choose which ones you might be prepared to adjust with a timeline, for example, not wanting to sleep in their own bed.
- Encourage eating, even if small quantities and regular amounts, it is not unusual to lose your appetite when anxious.
- Creating 'safe spaces' for this age group might involve having a 'safe blanket' to snuggle into, having a special corner in their room with their toys to snuggle into.
- Adult responses should be reassuring. Keep them away from discussions about the ongoing impact of the event or news.
- Talk about things that are going well.
- Make sure any communication they bring up is listened to and calmed by repeating that it was very, very unusual, and won't happen again. Give some examples of why it won't happen again, for example, road signs being put up, police being vigilant.

Things you might notice include:

1. Being quiet and withdrawn.
2. Being overactive, 'naughty', getting into trouble.
3. Easily startled.
4. Unwilling to do things they enjoyed, for example, after school clubs.
5. Either having conversations about fearful things or avoiding conversations about fearful things.
6. Not wanting to do new things.
7. An increase in physical symptoms such as tummy aches, headaches.
8. Fear of the dark, nightmares.
9. Finding it difficult to stop thinking about what happened.
10. Wanting to avoid places, people, things associated with the trauma.
11. Constant reassurance seeking.
12. Repetitive behaviours such as rocking, biting fingernails.

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Things adults can do to help:

- Respond rather than react to their behaviour.
- Respond in ways to help create safety, for example by being consistent and predictable.
- Avoid negative outlook conversations, for example 'I nearly lost you,' 'It so easily could have been you' since these types of statements make a child or young person feel unsafe. Even if not said directly, do not let them hear you discuss this with others.
- Limit exposure to TV, newspaper, and radio. Do not let them see graphic images.
- If they want to talk, provide them with opportunities to do this. Listen to their concerns and don't rush to provide alternatives. Reiterate how unusual the event was.
- Be as honest as you can. Try and provide reassuring answers since many questions asked by children this age are to get an answer to their worries and because they feel helpless and out of control.

Things adults can do to help:

- Whilst reassurance is helpful in the early days, move towards helping them self-reassure.
- Draw out children who don't talk. You could do this by discussing a character in a movie or sharing your own feelings without oversharing or giving too much detail. For example, you could say 'This is very scary, and I sometimes find myself thinking about what happened when I don't expect to. What about you?'
- Provide a 'safe place' for them or create one with them. A cosy place in their bedroom, a special duvet to wrap themselves in for example.
- Provide them with strategies to help them relax, for example, controlled breathing. The stem4 app Clear Fear has a range of breathing exercises to help.
- Help them engage with friends by providing play opportunities.
- Provide them with opportunities to face their fears, one small step at a time.
- Help stop repetitive behaviours developing into habits by providing them with alternative self-soothing strategies.



Ages 10-12 years

Whilst young people of this age may show all of the symptoms in an earlier age group, they may also:

1. Have constant images and re-experiencing of the trauma.
2. Constant talk about the trauma or
3. Avoiding talk about the trauma.
4. Show increased risk behaviours.
5. Fall out with peers or become excessive clingy and possessive of friends.
6. Say they are tired all the time, eat less, sleep less.
7. Have difficulty concentrating, not want to do work.
8. Become fearful of illness and death.
9. Become excessively involved online to either 'escape' reality or to search for peer groups/information.
10. Carry out repetitive self-soothing behaviour which might include harmful behaviours.
11. If they are at the upper end of the school and about to start a new school, they may want to avoid a new start or be increasingly anxious.

Things adults can do to help:

- Be emotionally and physically available.
- Don't take their behaviour personally. Allow expression and provide words and alternative actions.
- Listen and be prepared to speak about difficult topics.
- Keep repeating the fact that the incident is a one off.
- Allow some control in terms of being able to make age-appropriate choices.
- Provide positive experiences so they can build their self-esteem.
- Keep them busy. Daily activities that have a balance of playing with friends and schoolwork is helpful.

Things adults can do to help:

- Support transition by offering them some extra psychological support. Inform the new school they may be going to about what's happened and how best to support.
- Provide strategies to manage anxiety. The stem4 Clear Fear app has a range of breathing techniques as well as ways to manage worries and fears and face situations that may be being avoided.
- Provide strategies to help regulate emotions so that they don't get expressed as harmful behaviours. The stem4 Calm Harm app can provide a range of strategies to help with these together with the help of an adult. stem4 also provide Calm Cards which are formed of the most popular activities and can be used anywhere.
- Help them do things for others such as volunteer projects. It gives them a sense of accomplishment and purpose.
- Use real words to talk about death rather than 'she's in a better place'. Provide opportunities for them to be sad.
- Encourage meaningful memorials. Pray together, light a candle, do something in someone's memory.



Please note the Calm Harm app is an aid in treatment but does not replace it.

Managing 'near-miss' events and waiting:

A near-miss event is where a person is involved in a trauma and thinks they will die but escapes.

- People who have experienced a 'near-miss' experience can feel as if they have less reason to be upset or to seek help. This is a false belief since a near miss experience can have significant psychological impact.
- They may experience constant preoccupation or imagine what could have happened.
- They may feel guilty and self-blame. This can, in the long-term lead to low mood and to feelings of low self-worth.
- They may distance themselves from others and from things they enjoy.
- Children and young people who are 7 and over might be more inclined to think in this way rather than those who are younger. This is because concepts such as death and the ability to think outside of oneself develops as the brain matures and more neural pathways are laid.

Dealing with waiting:

Waiting, for news of recovery from injury or further intervention treatment and unknown outcome is very suspenseful.

Children may:

- Feel frightened because they don't know what's happening.
- Fear the worst and imagine a range of terrible scenarios.
- Feel isolated and alone.
- Feel like the trauma is happening all over again.
- Get very anxious and panicked as a result.

Managing 'near-miss' events and waiting:

Things adults can do:

- Address the waiting by providing information that's tailored to the understanding and age of the child or young person.
- Use words they will understand and provide small amounts of information.
- Avoid news sources or access of information or conspiracies on the internet.
- Do not speculate about the future, stick with the here and now.
- Provide information when you have time to support them once they process it rather than when you have limited time or are in a rush.
- Be aware they may not respond straight away. Give them space to process it.
- Provide opportunities for them to be open about their fears.
- Focus on the positives such as having the best care available, loved ones with them, pain relief etc.
- Be honest and tell them if there is information you don't know. You can offer to find out when the information is available.
- Don't worry if you are upset. It helps them to not be afraid of their own emotions.
- Create support networks for your child and for yourself.
- Brief childcare providers on what to say and how to comfort.
- Be aware that siblings might be affected by a family member's distress too. Tend to the wellbeing of the whole family.
- Get steps to support yourself.

Support for primary schools post a traumatic incident

Schools have several tasks to complete after a traumatic incident.

1. First and foremost, both students and staff, including support staff need to comfort and connect as a community.
2. Secondly, the right support needs to be established to help children and young people recover from trauma.
3. Third, staff need to recover from the trauma they have experienced to be responsive to student and colleague needs without being re-triggered themselves.
4. Memorials help bring the community together and place the importance of marking the impact of an event.

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Things that schools can do:

- Build a safe and trusting community. This includes providing positive relationships for students and staff to connect with, positive physical spaces and providing positive experiences to counterbalance the association of school with a negative experience. Establishing routines help to predict what's expected.
- Reassuring children and young people that school officials have made certain that school is safe, especially if the event happened at school. Remind pupils that these events are rare occurrences.
- Recognising the fact that many people will be fearful, and therefore stepping back from 'business as usual' in exactly the same way and providing opportunities for students and staff to manage anxiety through breathing, relaxation and to know what else they can do and where they can go to when they want to feel safe.
- Recognising that some students might display their fear through challenging behaviours. Providing opportunities to work with parents and carers in developing shared management and similar behavioural alternatives.

Support for primary schools post a traumatic incident

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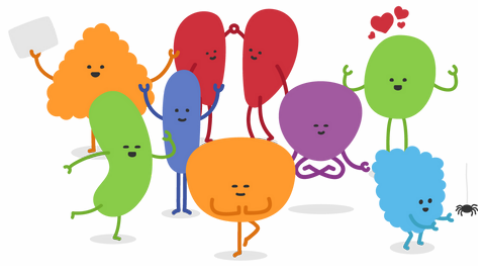
- Educating staff on the 'trauma informed' approach to education (available from the UK Trauma Council and Anna Freud 'Mentally Healthy Schools').
- Being aware that children and young people often express distress through an increase in physical symptoms such as stomach aches and headaches.
- Helping both staff and students access extra support. This can be early help, voluntary sector counselling or specialist CAMHS support.
- Whilst resilience skill building is important, it should not be rushed into and should follow on about 3-6 months after an incident.
- Children with special needs will need extra time, support, and guidance. They may need more repetition and easy to understand concepts.
- If the student is to move onto another school, making sure the school they are going to is informed of what has happened and making recommendations of how to support them.
- Memorials should be short and uplifting, with speeches and activities relevant to the age of the child or young person. Permit parents and carers to attend with the child or young person.

The most comprehensive resource for schools is from the UK Trauma Council.

<https://uktraumacouncil.org/resources/critical-incidents>

The UK trauma council also provide a policy framework if the school already hasn't got one in place, INSET training and lesson plans and guidance for leaders.

Conclusion



Humans are innately resilient, and our survival instinct will kick in to enable recovery from even the most traumatic of experiences. With love, security and guidance, unsettling thoughts and fearful feelings can start to become less impactful. Providing age-appropriate support, extra reassurance and targeted help will enable traumatic stress to fade and for the process of recovery to begin.



About Dr Nihara Krause MBE, BSc(Hons) MSc PsychD C.Psychol C.Sci AFBPsS

Dr Nihara Krause is an award-winning Consultant Clinical Psychologist, with many years of clinical experience. Having worked as an NHS Consultant, she now runs her own private practice and is also a University lecturer.

Dr Krause has developed the MINDYOUR5 wellbeing programme adopted in a number of schools and is the clinical creator of Calm Harm, Clear Fear, Worth Warrior, Move Mood, Combined Minds and Head Ed.

In 2015 David Cameron presented her with the Point of Light Award for her work and in 2014 she received the Mayor of London's Award for her commitment to the community. She received the 'Making a Difference' award for mental health by the Positive Practice Collaborative in 2016 and a Certificate for Outstanding Contribution to Merton in 2018. In 2019 Dr Krause was honoured to receive the British Citizen's Award, health (BCAh) for her contribution to the health of children and young people in the UK.

Additional resources



The stem4 app portfolio, specifically

- Clear Fear app to help manage anxiety.
- Calm Harm to help regulate difficult emotions

Books for children of Primary School age:

- 'Once a terrible thing happened', by Margaret M Holmes and Sasha Mudlaff
- 'Once I was very, very scared', by Chandra Ghosh Ippen
- 'Healing Days: A Guide to Kids who have experienced trauma', by Susan Farber Straus
- 'Whimsy's Heavy Things', by Julie Krawlis
- 'When dinosaurs die: a guide to understanding death', by Laura Krasny Brown

Disney films that get children talking about emotions:

- Inside Out
- Tangled
- Encanto
- Charlotte's Web

Forms of therapy that are helpful for children who have experienced PTSD include:

- Play therapy.
- Art Therapy.
- Trauma Focussed Cognitive Behaviour Therapy.
- Eye movement desensitization and reprocessing (EMDR) therapy.

For adults:

- Please contact your GP
- NHS Talking Therapies Service Finder: <https://www.nhs.uk/service-search/mental-health/find-an-nhs-talking-therapies-service>
- EMDR association

Who are we?

stem4 is a charity that promotes positive mental health in teenagers and those who support them including their families and carers, education professionals, as well as school nurses and GPs, through the provision of mental health education, resilience strategies, and early intervention.

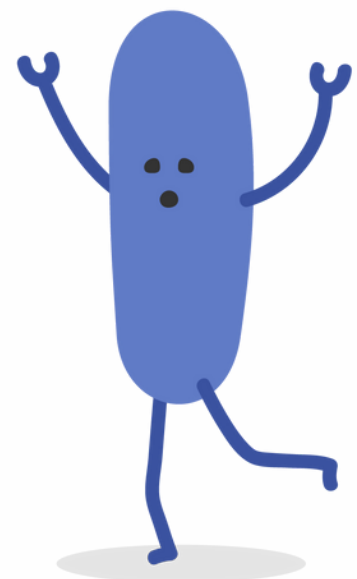
This is primarily provided digitally through our innovative education programme, pioneering mental health apps, clinically-informed website, and mental health conferences that contribute to helping young people and those around them flourish.

Our Mission

To foster the development of good mental health in teenagers through enhancing early understanding and awareness in individuals, their families, schools and the community, promoting shared early detection and signposting towards prompt action and intervention.

Our Aims

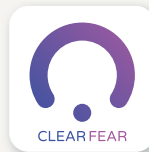
- Raise early awareness and highlight the importance of early intervention in teenage mental health issues—taking steps to help stem problems at an early stage.
- Educate through interactive conferences for schools, digital tools such as the Head Ed programme, and through our comprehensive website.
- Encourage debate and shared information through a programme of conferences targeting students, parents/carers, education professionals, school nurses, and GPs.
- Provide self-help through our mental health app library, website, and booklets.



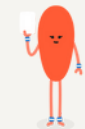
stem4's mental health apps



A free app to help teenagers resist or manage the urge to self-harm
www.calmharm.co.uk • @calmharmapp



A free app to help children and young people manage the symptoms of anxiety
www.clearfear.co.uk • @clearfearapp



A free app to help teenagers manage low mood and depression
www.movemood.co.uk • @appmovemood



A free app to help families and friends provide mental health support
www.combinedminds.co.uk • @combmindsapp



A free app to help young people manage negative body image, poor self-worth,
 and related early-stage eating difficulties or disorders
www.worthwarrior.co.uk • @worthwarriorapp

stem4's award-winning apps are available to download from the App Store and Google Play.



Please note that these apps are an aid in treatment but do not replace it.

stem4
 supporting teenage mental health

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