Talking to a Child about a Traumatic Event

Even in the seemingly simple world of a child, life can be overfilled with complexities and uncertainties. Violence, crime, accidents, and death are an unfortunate reality in the world we live in. Parents need to help their children sort through troubling emotions following a traumatic event and encourage them to grieve properly.

The importance of talking to our kids

Few things in life can prepare us for a tragedy or great misfortune. Children are often hit the hardest during these times, especially if they've never experienced trauma or loss before. A range of difficult and confusing emotions can surface in a child, and she may find it hard to express these feelings or reach out to others for comfort and consolation. Parents and caregivers can create a safe environment for children to talk about these emotions.

Kids need to feel comfortable confiding in a person who's willing to listen to their concerns. They need to feel understood. They need to let the pain out instead of bottling it up inside. And they need to be reassured that, though it may take time to grieve and heal, things are going to be all right. While it's important to have this kind of support from relatives, friends, and others who also may have been affected by the traumatic event, the most vital resource a child has in a time of crisis is her parents. Though they may not come out and admit it, kids who are suffering need mom and dad to be willing and available to listen and talk.

Understanding a child's emotions

Experts say although children may not show much sorrow and pain outwardly, all children mourn when a traumatic event occurs. Children need to be allowed to express their emotions in their own way, so long as it does not compromise their safety. Many younger kids act out difficult feelings through play and certain behaviors, such as anger, clinginess, irritability, or regression (e.g., thumbsucking long after quitting the habit). Older children may vent their emotions by verbally lashing out in anger at the ones they love, listening to moody or aggressive music, and secluding themselves in their rooms. Provided they don't extend for too long a period, these age-appropriate behaviors are considered relatively normal coping mechanisms.

Children also need to be reassured that the traumatic event is in no way their fault, and that they are strong enough to carry on. Many children assume guilt and blame when a misfortune out of their control happens. Others build up an incredible anger that such a catastrophe could happen to them, and may direct their anger at loved ones. Though it will be tough, parents need to be honest, consistent, accepting, and loving in their approach to handling these issues with children. Above all, parents should acknowledge that the emotions their kids are feeling are absolutely real. Talking to your children about what they're feeling and offering to help will assure them that you are trying to understand.

The stages of grieving

Children, like adults, each cope with grief in a different way. Typically, however, most kids go through the following common stages of grieving:

1. Shock, denial and isolation. "This can't be happening to me." The anxiety of these feelings can also cause physical symptoms such as bedwetting, exhaustion, and sleep disturbances.

2. Anger. "Why me?" If someone died, for example, the child may feel abandoned or rejected by the deceased, demonstrate rage, and blame others such as her parents or God.
3. Guilt. "It's my fault," or "If only I hadn't done..." Because teens frequently disagree with their parents, they may carry guilt if a trauma affects one of their parents.

4. Bargaining. "If you just make it better, God, I promise to..."

5. Depression. "It's no use." The child may feel emotions such as deep sadness, helplessness, hopelessness, and isolation.

6. Acceptance. "I acknowledge what has happened, and I can get through this." The child learns to carry on and the trauma recedes in importance in day to day life.

Coping tips

- Find solace in people who understand. Connect with other families who may also be experiencing tragedy or loss. Get involved with a support group. Ask what worked to help their children cope with a trauma.

- If the traumatic event resulted in the loss of life, commemorate the memory of the deceased. Attend a memorial service with your child. Honor the deceased by planting a commemorative garden in your backyard, or creating a special dedication drawing or painting with your child. Visit the site of the tragedy together and dedicate flowers or another loving token or gesture of respect. Returning to the scene of a misfortune can help bring difficult emotions out into the open and begin to bring closure to your child's suffering.

- Consider talking to a clergyman about the spiritual significance of the traumatic event. Your child may be able to find a higher meaning in the suffering through religious counsel.

- Give your child enough time to mourn and heal properly. Don't try to rush her back into school or make her "forget" her pain too early.

- When the time is right, try to make her feel safe, secure and comfortable by returning to regular family routines. Children thrive on routines and structure, so long as they're not used to ignore or bury an unresolved problem.

Don't be afraid to seek professional help to ease your child's suffering, especially if her sadness lingers.

Warning signs

Some children have more difficulty than others coping with a traumatic event. Experts say that most kids return to a state of normalcy and acceptance by no longer than six months after the misfortune, depending on its severity. However, if you observe the following warning signs in your child over a prolonged period of time, seek professional help:

- Lack of interest in daily activities
- Denial: the child pretends that the event hasn't happened
- Fear of isolation
- Poor grades and declining performance in school
- Frequent bouts of panic
- Social withdrawal from friends and family
- Inability to sleep
• Lack of interest in eating
• Irritability and uneasiness
• Regression: acting younger than her age
• Bedwetting long after being potty trained
• Use of alcohol or drugs in older children

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