Trauma

Trauma is caused by an unforeseen event that causes extreme fear and possible harm to a child. It is also referred to as emotional harm and it is the relatively normal reaction that occurs in response to an extreme event. A student’s age, level of development, and availability of support will factor into how well he/she deals with the trauma. With psychiatric trauma, emotional and distressful memories are stored in the brain and can lead to other emotional and social problems. Trauma does not typically appear during the traumatic event, but rather once it is over. The trauma can appear within days, weeks, months or years.

Trauma-causing events can include but are not limited to:
- Violence (e.g. school shootings, witness/victim of abuse)
- War
- Terrorism
- Sexual abuse
- Natural disaster (e.g., fire, hurricane, earthquake, flood)
- Accidents
- Medical procedures
- Serious threats (e.g. bomb threats)

Why is this important?
About 50% of children are exposed to a traumatic event. And, as many as 67% of trauma survivors experience lasting psychosocial impairment. Trauma can affect a child’s brain and delay certain abilities which can make it harder for the child to concentrate and study. A traumatic event can also hinder a child’s emotional maturity. The child may also experience many negative emotions in which he/she may feel extreme betrayal and a lack of faith in his/her life and the world. Trauma can have serious effects on a student’s well-being physically, emotionally and academically. According to the American Psychiatric Association, educators can play an important role in the way they respond to trauma.

Some children will experience difficulty coping with the traumatic events and may develop Post Traumatic Stress Disorder (PTSD), Child Traumatic Stress (CTS), depression or overwhelming, prolonged grief.

PTSD is an anxiety disorder that occurs following exposure to an extreme stressor (i.e., when a person sees or is a part of a highly traumatic event). The event will usually be a life-threatening or extremely distressing situation that causes a person to feel intense fear, horror or a sense of helplessness. The risk of developing PTSD is related to the seriousness of the event, the child’s proximity to the event, whether or not the event was repeated and the child’s relationship to those affected.

CTS occurs when children and adolescents are exposed to traumatic events or traumatic situations, and when this exposure overwhelms their ability to cope with what they have experienced. Depending on their age, children respond to traumatic stress in different ways.

Signs & Symptoms
People respond in different ways to extreme trauma. Some people may:
- Relive the event
- Avoid reminders and experience frequent flashbacks
- Have ongoing fears related to the
disaster (involving loss or separation from parents)
• Have sleep disturbances or nightmares
• Look on guard, uneasy or jumpy
• Seem disconnected or have relationship problems
• Have psychiatric problems such as depression, suicidal thoughts, dissociation (losing conscious awareness of the “here and now”), or anxiety
• Engage in aggressive and/or self-destructive behavior (i.e., alcohol or drug abuse, high-risk sexual behaviors)
• Have physical complaints (i.e., stress-related conditions, eating disorders, headaches)
• Have more absences from school/refusal to go to school
• Experience concentration difficulties or irritability

What can educators do about it?
• Early intervention is critical
• Remember that you are a role model for the student. Students will immediately pick up on how you respond to traumatic events.
• Refer the child to the school’s counselor or a medical professional.
• Alert the student’s parents.
• Answer the student’s questions. Be as honest as possible, listen intently and use simple words. Be prepared to repeat answers and conversations. Offer plenty of class time for discussion if appropriate and avoid rumors and misconceptions. Make sure the students know that their feelings are perfectly normal.
• Implement activities aside from just open discussion (e.g. art projects) that may allow the students to express what they are feeling.
• Stick to as normal a classroom routine as possible.

Resources/Links

American Academy of Child & Adolescent Psychiatry


The National Child Traumatic Stress Network

National Child Traumatic Stress Network
Resources for School Personnel
http://www.nctsn.org/resources/audiences/school-personnel

National Institute of Mental Health (NIH)

PBS America Responds
Classroom Resources
http://www.pbs.org/americaresponds/educators.html

Thirteen Online Education: Dealing With Tragedy
Tips and Resources for Teachers and Parents
Lesson plans to use in response to traumatic events. http://www.thirteen.org/edonline/tips.html#lessonplans

Dealing With Tragedy: Tips for teachers
https://www.thirteen.org/edonline/tips.html#teachers

Adapted from Resources found on:
www.schoolmentalhealth.org
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MHAMD   ~   443-901-1550   ~   www.mhamd.org  MCF   ~   410-730-8267   ~   www.mdcoalition.org

The Children’s Mental Health Matters! Campaign is a collaboration of the Mental Health Association of Maryland (MHAMD) and the Maryland Coalition of Families (MCF) with support from the Maryland Department of Health - Behavioral Health Administration. The Campaign goal, with schools and community champions across the state, is to raise public awareness of the importance of children’s mental health. For more information, please visit www.ChildrensMentalHealthMatters.org