

Tip Sheets

Trauma: How Children Respond

Trauma Defined

The National Childhood Traumatic Stress Network describes trauma as:

1. Experiencing a serious injury to oneself or being a witness to a serious injury or death of another individual.
2. Experiencing imminent threat of serious injury or death to oneself or others.
3. Experiencing abuse, harm or damage to one's personal physical integrity.

Developmental Responses to Trauma

Almost all children will experience some sort of distress or reaction following a traumatic experience. This is normal and to be expected, although the symptoms of trauma may not show up



until weeks or months after the experience.

The symptoms of trauma differ in each individual. Children of

varying ages will have different developmentally-specific responses. The way in which the impact of trauma presents itself is based on age and where the child is at developmentally.

Common Responses to Trauma

The most common responses to trauma include:

- Clinginess
- Separation anxiety

- Anxiety related to what “might happen”
- Difficulty concentrating
- Challenging behaviors

Birth to 2 years of age

In addition to the common responses to trauma, young children from birth to 2 years of age exposed to trauma may demonstrate a number of challenging behaviors, such as:

- Acting withdrawn
- Demanding attention using both positive and negative behaviors
- Poor verbal skills
- Aggressive behaviors
- Memory problems
- Fear of adults who remind them of the traumatic event
- Nightmares or sleep difficulties
- Poor appetite, low weight and/or digestive problems
- Screaming or crying excessively
- Irritability, sadness and anxiety
- Easily startled

3 to 6 years of age

Children 3 to 6 years of age exposed to trauma may exhibit the above responses and challenging behaviors as younger children, as well as:

- Acting out in social situations
- Acting anxious, fearful and avoidant
- Inability to trust others and make friends
- Being verbally abusive
- Displaying excessive/frequent temper that lasts longer than usual and intense anger and reactivity

- Believing the traumatic experience is their fault
- Developing learning disabilities and/or having difficulty focusing on tasks/learning
- Experiencing headaches or stomachaches
- Fearing separation from parent or caregiver
- Developing poor sleep habits such as staying up late or waking up earlier than usual
- Lacking self-confidence
- Imitating or act-out the traumatic event
- Overreacting to touch, sounds, smells, etc.
- Showing regressive behaviors such as:
 - Not able to do things they used to do
 - Poor development of skills
 - Toileting accidents and/or bedwetting
 - Thumb-sucking
 - Baby talk
 - Wanting to be carried

Conclusion

These responses can be viewed as a child's attempt to return to the world they knew before the traumatic experience. Experiencing a traumatic event does not mean that the child will be irreparably damaged or that he will definitely have challenges throughout life because of the event.

With time and support most children will return to their level of functioning prior to the experience.

Additional Resources

Child Trauma Academy
<http://childtrauma.org>

For more information, visit www.inclusivechildcare.org.

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