

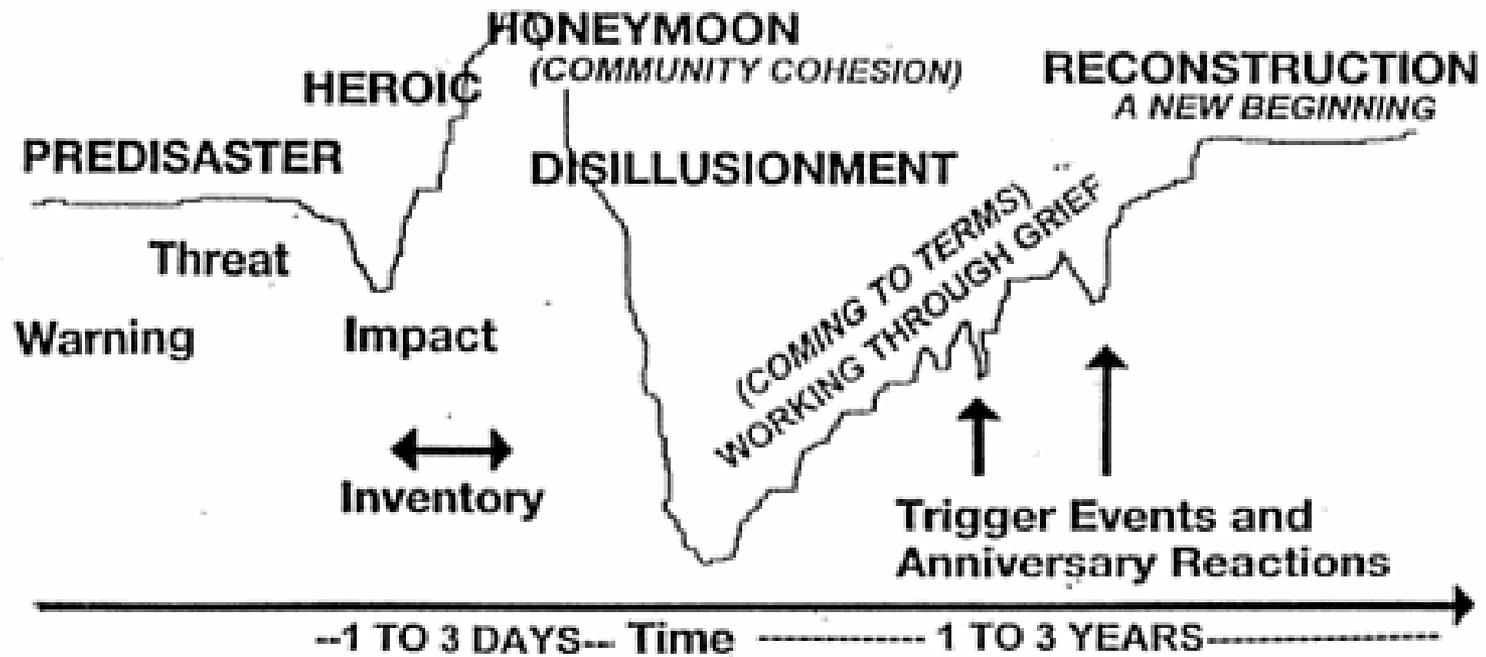
# Children and Disaster: Are therapists a help or a hindrance?

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# Phases of Disaster



# Heroic

- Time of impact and period immediately afterward
- Emotions are strong and direct
- Save own and others' lives and property
- Family, neighbors, emergency team

# Honeymoon

- 1 week to 3-6 months post
- “We lived through it!”
- “We shared it!”
- Expect assistance from government – high expectations

# Honeymoon

- Clearing of debris
- Overwhelmed by promises of great help to rebuild
- Pre-existing and emergent community groups for support

# Disillusionment

- 2 months – 1-2 years
- Disappointment, anger, resentment, bitterness if delays in getting help, unfilled hopes or promises of aid

# Disillusionment

- Concentrate on rebuilding own lives and solving individual problems.
- Feeling of shared community is lost

# Disillusionment

- Outside agencies pull out
- Community agencies weaken
- Desperate need for alternative resources

# Disillusionment

- Anniversary response and trauma triggering events may create increased distress and emotional outbursts
- Need support to work through grief

# Reconstruction

- Several years post disaster
- Need to solve our own problems
- Visible recovery efforts reaffirm belief in self and community

# Reconstruction

- If recovery is delayed emotional problems which appear may be serious and intense.

# Reconstruction

- Assume responsibility for own recovery
- New construction plans reaffirm belief in capabilities and ability to recover

# Reconstruction

- Community groups with long term investment in the community and its people become key support

# Psychological First Aid

- Contact and engagement
- Safety and comfort
- Stabilization
- Information gathering
- Practical assistance
- Connection with social supports
- Information on coping
- Linkage with collaborative services

# Safety and Comfort

- Ensure physical safety
- Provide info about activities and services
- Attend to physical comfort
- Attend to children separated from caregivers
  - Child friendly space away from rescue area
  - Bring in toys and materials
  - Protect from additional trauma
  - Shield from reporters and onlookers

- Excessive viewing of coverage is highly upsetting and can create long term anxiety and PTSD
- Parents should let children know that they're keeping track of info and they should seek updates from them.

# Stabilization

- Enlist family and friends to provide comfort to the family
- Address the primary immediate concern – avoid telling them to calm down or to “feel safe”
- Empower parents to calm their children
- Remain calm, quiet and present

# Stabilization

- “After bad things happen your body may have strong feelings that come and go. When you feel really bad, that’s a good time to talk to your parents.”
- Lots of adults are working to make things better.
- Staying busy can help you start to feel better.
- Work on breathing and staying in the moment.

# Practical Assistance

- It sounds like you're worried about several different things, like what happened to your house, when dad is coming, and what will happen next. Those are all important things, but lets think about what is most important right now and make a plan.
- You're doing a great job of letting grownups know what you need.

# Comforting Children

- Calm your own fears first!
- Children will react to the fears and anxiety of caregivers
- Need reassurance that caregivers have family life under control

# Comforting Children

- Maintain close contact
- Increase physical proximity
- “We will keep you safe”
- Accept clingy behavior and need for increased attention

# Comforting Children

- Increase reassurance about your presence and their safety
- Good people are in charge.
- Lots of people are working to make this better – even all night long.

# Comforting Children

- Increase soothing activities
- Walk
- Play
- Music
- Snacks – but sit down together and talk!

# Stress Symptoms

- New fears of loud noises
- Less interest in play
- Somatic complaints
- Fear, anger, sadness

# Caregiver Support

- Provide psychoeducation about normal stress reactions
- Validate children's feelings
- Protect children from too much information
- Keep info developmentally appropriate

# Caregiver Support

- Help develop constructive ways of expressing emotion
- Be patient, understanding, reassuring and accepting
- Encourage respite as needed

# Maintain Routine

- Security = life is stable and predictable
- Stick to usual schedules and routines
- Increase support at bedtime
- May need to co-sleep

# Maintain Routine

- Don't make everything about recovery
- Engage in enjoyable activities
- Use family and friends as support

# Promote Positive Action

- What can we do to feel better?
- Write a story, draw a picture
- Play with clay
- Physical activities
- Read a story
- Dance

# Connect with others

- Ensure that children receive affection and attention
- Reach out to others with visits and phone calls

# Responding to Toddlers

- Only talk if the child asks a question
- “Mommy and daddy love you and we will keep you safe.”
- Don’t frighten them with details
- Shield from the news/overhearing adults

# Responding to 3-5 year olds

- Respond to questions
- “It’s okay to feel upset but we need to use words to say we are mad or sad.”
- Teach healthy emotional expression

# Responding to 3-5 year olds

- Bowlby, “On knowing what you’re not supposed to know.”
- Shield from TV and adult conversation
- Shield from overhearing phone calls

# Responding to 6 - 11 year olds

- Bring up the conversation
- “What are you hearing from friends at school?”
- “Have your teachers talked about it?”
- Accept feelings / LISTEN

# Responding to 6 – 11 year olds

- Not all children will show emotion
- Avoid judging the child's response
- Create a special signal or space to let parent know they need to talk

# Reactions to Trauma

- Distressing thoughts and images
- Upsetting emotional or physical reactions to reminders of the experience – it might feel to the child like it's happening all over again
- Avoid talking or thinking about it. Go to great lengths to avoid reminders of the event.
- Avoidance causes feelings of detachment
- Always being on the “look out” for danger, jumpy, irritable, angry outbursts, can't sleep

# Behavioral Concerns

- Lack of impulse control
- Self-destructive behaviors
- Destruction of property including favorite and precious objects
- Verbal and physical aggression
- Stealing
- “Crazy” and obvious lying
- Inappropriate sexual conduct
- Cruelty to animals

# Behavioral Concerns

- Preoccupation with violence, gore, fire
- Sleep disturbance
- Enuresis and encopresis
- Oppositional defiant behaviors
- Hyperactivity, constant need for stimulation
- Behave as though new caregivers are responsible for past abuse
- Blame others
- Self endangerment

# Emotional Concerns

- Intense displays of anger, rage, violence
- Inconsolable sadness, helplessness and depression
- Inappropriate emotional responses
- Marked mood changes
- Inappropriately demanding and clingy
- Resentful

# Social Concerns

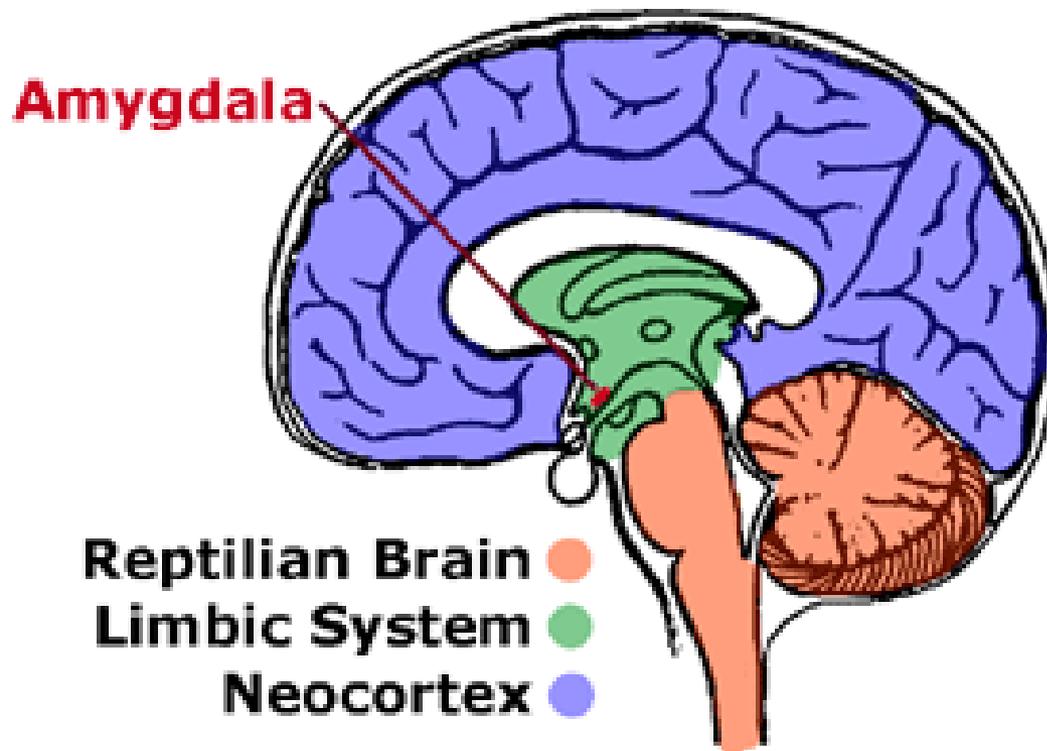
- Superficial and charming with strangers
- Little eye contact
- Poor peer relationships
- Fight for control over everything
- Bossy
- Manipulative, controlling, exploitive
- Lack remorse or conscience

# Physical and Developmental Concerns

- Poor hygiene, self-neglect
- Confusion over physiological states
- Abnormal eating patterns
- Body tension
- Accident prone
- High pain tolerance, over-reactive to minor injuries
- Dislike being touched

# Trauma and the impact on the Brain

# The Evolution-Designed Brain



# Amygdala

- “We depend on the amygdala to warn us of impending danger and to activate the body’s stress response.
- When presented with images, sounds or thoughts related to their experiences, the amygdala reacts with alarm.

# Activation of the fear center

- Triggers the cascade of stress hormones:
  - » Increases heart rate
  - » Drives up blood pressure
  - » Prepares body for fight or flight
  - » May cause “**frantic arousal**”

# Broca's area and the inability to communicate when "triggered"

- Speech center of the brain
- "Without a functioning Broca's area you cannot put your thoughts and feelings in words.
- For some – Broca's area goes offline whenever a flashback is triggered.
- The effects of trauma are not necessarily different from lesions from strokes.

# ALL TRAUMA IS PREVERBAL

- Under extreme conditions people may simply shut down. Victims of assaults sit mute and frozen in emergency rooms. Traumatized children “lose their tongues” and refuse to speak. Photos of combat soldiers show hollow eyed men staring into a void.

# Trauma Narratives

- “Even years later traumatized people have enormous difficulty telling others what happened to them. Their bodies re-experience terror, rage, and helplessness, as well as the impulse to fight or flee, but these feelings are almost impossible to articulate.
- “Trauma drives us to the edge of comprehension, cutting us off from language based on common experience or an imaginable past.”

# Trauma Narratives

- “It is enormously difficult to organize one’s traumatic experiences into a coherent account – a narrative with a beginning, middle and end.”

# Narratives

- “When words fail, haunting images capture the experience and return as nightmares and flashbacks.
- Brodman’s area 19 lights up – the area of the visual cortex that registers images when they first enter the brain.
- The brain is rekindled as if all trauma were reoccurring.

# Deactivation of the left hemisphere

- Capacity to organize experience into logical sequences and to translate our feelings and perceptions into words.
- Broca's area may black out during flashbacks.
- Without sequencing we can't identify cause and effect, grasp long term effects of our actions or create coherent plans for the future.

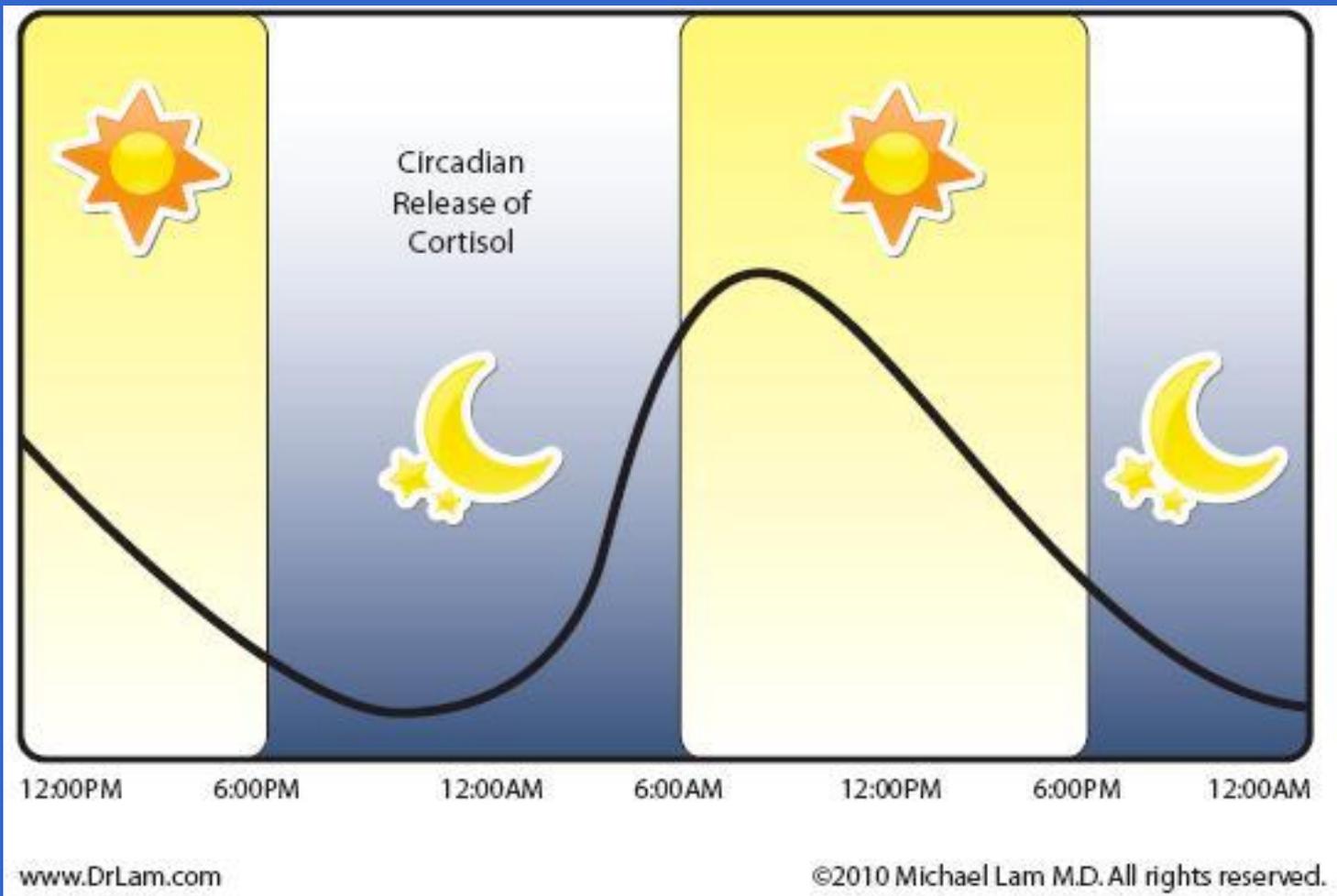
# Trauma Reminders

- “When something reminds traumatized people of the past, their **right brain reacts as if the traumatic event were happening in the present.**”
- They are unaware that they are re-experiencing and re-enacting because the left side is not working very well.
- So they **look for someone to blame for their misery.**

# Stress Hormones

- Stress hormones (Cortisol) in traumatized people take much longer to return to baseline and spike quickly and disproportionately in response to **mildly stressful stimuli**.
- Effects include:
  - Memory and attention problems
  - Irritability
  - Sleep disorders

How do these health issues



## When Cortisol is too high...

- Hypersensitizes the brain to pain
- Get a second wind at bedtime and can't sleep
- Can't "get up and go" in the morning
- Impacts immune system
- Raises blood sugar – leads to junk food consumption
- Decreases testosterone
- Nausea, heartburn, cramps, diarrhea
- Anxiety, "jitters", nervous stomach, feelings of panic and paranoia
- Feelings of depression and just feeling "blue"

# Impact of Trauma on daily life

- “Being traumatized means continuing to organize your life as if the trauma were still going on – unchanged and immutable – as every new encounter is contaminated by the past.”

# Psycho-education about PTSD

- Provide psych education about PTSD symptoms
- Alert caregivers that they may emerge after 6 months or 1 year
- Encourage follow-up assessments
- Provide brief information about the importance and effectiveness of EB treatments.

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