



Building Resilience in Children and Youth Dealing with Trauma

Even very young children can be affected by traumatic events and have serious problems later in childhood and adulthood. But the great news is that, with help from families, providers, and the community, children and youth can demonstrate resilience when dealing with trauma.

Traumatic experiences can range from a one-time incident, such as a sudden death of a loved one or a natural disaster, to ongoing exposure to experiences, such as bullying or family violence. Identifying that a child has experienced trauma is not always easy because emotional and behavioral responses to trauma vary depending on a child's age, personality, the type and severity of the incident, and availability of adult support.

Studies on stress response in children show that there can be physiological and structural changes in the brain and neurological systems and can, without intervention, result in enduring problems such as depression, anxiety, aggression, impulsiveness, delinquency, hyperactivity, and substance abuse.

- More than 60% of youth age 17 and younger have been exposed to crime, violence and abuse either directly or indirectly.
- Young children exposed to 5 or more significant adversities in the first 3 years of childhood face a 76 percent likelihood of having one or more delays in their cognitive, language, or emotional development.
- As the number of traumatic events experienced during childhood increases, the risk for the following health problems in adulthood increases: depression; alcoholism; drug abuse; suicide attempts; heart and liver diseases; pregnancy problems; high stress; uncontrollable anger; and family, financial, and job problems.

There is a range of behaviors that could be signs that a child is having difficulty dealing with a traumatic event, such as, but not limited to:

- Separation anxiety or clinginess towards teachers or caregivers
- Changes in appetite
- Decreased interest in and/or withdrawal from friends or family and normal activities
- Over- or under-reaction to physical contact, sudden movements, and sounds
- Angry outbursts and/or aggression
- More frequent complaints of headaches, stomachaches, or fatigue
- Repeatedly recreating the event through comments, drawings, or activity
- Emotional "numbing," or expressing no feelings at all about the event
- Drop in school performance

What can teachers, caregivers, and other adults do to help a child who has experienced trauma? The U.S. Substance Abuse and Mental Health Services Administration (SAMHSA) offers these suggestions:

- Maintain usual routines
- Make sure that the child is not being isolated
- Provide a safe place where the child can talk about the incident
- Be sensitive to potential environmental cues that may cause a reaction (e.g., an approaching storm or the anniversary of an event)
- Prepare the child in advance of a change in routine or other event that could be unsettling
- Monitor what information the child shares with other children to prevent excessive curiosity from peers
- Nurture the child's positive self-view
- Draw on cultural and familiar assets

With the support of caring adults, children can recover from traumatic events, reestablish a sense of well-being, and obtain treatment and other services if needed. **The more you know about trauma and children, the more you can do to help them.** For more resources on early childhood and trauma, visit http://www.samhsa.gov/children/earlychildhood_trauma.asp.

If you or someone you know is in crisis and needs to talk, please call 1-800-273-TALK (1-800-273-8255).

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 - » [Press Briefing](#)
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 - » [Collaborating Organizations](#)
 - » [SAMHSA Grantees](#)
 - » [Conferences and Meetings](#)
- » [Materials and Resources](#)
 - » [Early Childhood and Trauma](#)
 - » [Young Adult Resources](#)
 - » [Data](#)
 - » [Best Practices/ECCO](#)
 - » [Technical Assistance Tips](#)
- » [Preparing for Awareness Day](#)
 - » [Event Materials](#)
 - » [State and Local Ideas](#)
 - » [Media and Social Media](#)
 - » [National Event](#)
 - » [Past & Future Events](#)
- » [SAMHSA Children Home](#)

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