

Royal Manchester Children's Hospital Paediatric Psychosocial Service

Coming to terms with a traumatic or frightening event:

Information for young people, parents and carers



Introduction

Being involved in an accident or getting injured, and having to come into hospital can be frightening. Frightening or traumatic events can be difficult to cope with. It is normal to have reactions and to feel different after a frightening event. Some of these reactions might seem scary. Knowing why they happen can make them less worrying.

This leaflet explains:

- Some of the reactions you might experience.
- Why you might be responding in this way.
- How you can manage these responses.

Reactions after a frightening event

Everybody responds differently. How you react depends on what happened, your age, your personality, and the way you usually cope with stressful events.

Below are some common reactions to a frightening event.

The next section explains some common reactions to a frightening event.

Older children, young people and adults	Younger children (below 10 years)
Flashbacks (memories	Clinginess
popping into your mind)	Loss of abilities/skills or acting
'Reliving' the experience (feeling as though it is happening again)	like a younger child (e.g. sucking thumb, using baby talk, soiling or wetting, etc.)
Avoiding things that remind you of the event	Acting out or re-creating the event through play
Feeling up and down	
Feeling jumpy and on the lookout for danger	
Poor sleep	
Nightmares	
Poor concentration	

These are normal ways of responding to an unusual, difficult event. They usually fade over time, but there are things you can do to help you or a child to feel better.

Why do these reactions happen?

These reactions happen because of how the brain works when we are very frightened. When we are very frightened, the brain makes snapshot memories. These memories are filled with feelings, sounds, smells and sights. They can end up mixed up and in the wrong order, like a messy box of photos. After the frightening event, the brain starts sorting through the snapshot memories. This makes us think about the event when we may not want to. This can cause flashbacks and nightmares, and it can feel as though the event is actually happening again.

We may also feel more jumpy because the brain has put the body into 'super safe mode'. When we are in 'super safe mode', we are always on the lookout for danger.

It might sometimes feel like these reactions happen for no obvious reason. Other times, it might be clear that these reactions were triggered by something. For example, reactions might be triggered by hospital procedures, talking about what happened, seeing reminders on the TV, or going back to where the frightening event happened.

When the brain has organised all the snapshot memories into a clear story, it will not need to go through them anymore. The memories will stop appearing when we do not expect or want them to. The brain will switch off 'super safe mode' and the body will feel less jumpy.

How can these reactions be managed?

There are several ways you can manage your own reactions, or support a child with their reactions.

Supporting your child

- Reassure your child that these reactions are normal and happen to lots of children after a frightening event. Remind your child that they are safe and with people who will look after them.
- Answer your child's questions simply and honestly. They may need to ask the same question over and over again to understand the answer and to start to feel safe.

- Let your child know it is okay to tell you about bad dreams, flashbacks, or about the event. Gently encourage them, but do not push them. Some children prefer to draw or play rather than talk.
- Distract your child during hospital procedures or if they seem anxious. Find something they enjoy doing that they can focus on.
- As much as you can, help your child to have a daily routine. If they are still in hospital, this might have to be different to their routine at home or before the event. However, doing roughly the same things at the same time each day (e.g., meal times, story time, and bedtime) will help them feel safe and secure.
- Try to build your child's confidence. Focus on their strengths, the things they can do well, and the things you like about them.

Managing your own reactions

- Don't try to avoid thinking about what has happened. Thinking through the event can help your brain put together the story of what happened. Talk to someone you trust about what happened.
- Practise deep breathing or relaxation strategies. This might be something you and your child can do together.
- If you have a flashback or feel like you are going through the event again, remind yourself where you are, that you are safe, and that the event is not happening again. This can help you feel less anxious by re-focusing on the present. Look around you – what can you see, hear, smell, and feel? Where are you? What time is it? You can also do this with your child if they have a flashback.

 After a frightening event, people sometimes avoid doing things they used to enjoy or things that are important to them. This might be because they feel very on edge, or because they are worried about people asking them questions. Gradually returning to your usual routine will help your mood, and provide normality and stability for your child.

What will happen as time goes on?

Some people find the reactions stop gradually. Others find the reactions start at a later date, for example when they go home from hospital. The reactions might also start if friends and family ask questions about the event, when someone sees their injury for the first time, if the injury means they cannot do things they used to enjoy, or if they are going back to the place where the injury happened.

The most important thing to do is to look after yourself.

For some people, these reactions settle down quickly. For others, they last longer. If these reactions continue a month after the injury or start later, it might be helpful to get some support.

How can I explain my reactions to other people?

Other people in your life might struggle to understand these reactions. It can be difficult to explain how the frightening event has made you, or your child feel. It might be helpful to share this booklet with important people in your life.

Part of looking after yourself might be seeking practical and emotional support from family and friends. Helping people understand how you are feeling could be an important first step in feeling supported.

How can I support my other children?

Sometimes brothers and sisters of a child who has been through a frightening event can also have these reactions, even if they did not see any or all of what happened. You can use the same strategies on the previous pages to support them.

How can I get more help?

Usually these reactions settle down on their own. However, if you, your child or your family would like more support, you can contact your GP, Consultant or another member of the healthcare team who can arrange a referral to the paediatric psychosocial service. It is very normal for families who have experienced a frightening event to seek some support from someone like a psychologist.

What would meeting a clinician from the paediatric psychosocial team involve?

A clinician from the psychosocial service can support you or your child to talk about the frightening event and the effects it has had. The clinician is trained to help you with your distress. They can also support you to achieve goals that are important to you. For example, they help people:

- Get back into their usual routine.
- Cope with questions from others about what happened.
- Go back to where the frightening event happened.

Coping with a frightening event can be difficult for children, young people and their families. It is normal to worry about the future, how long reactions will last, and if things will get better. Although it can take time, and sometimes professional support, reactions to frightening events can fade or disappear entirely. Families can learn to cope, and to support each other with difficult emotions. Families can discover their strengths, as well as skills they weren't aware of before.

The paediatric psychosocial team can work with you to create a positive future for you and your child after a frightening event.

Contact details:

Paediatric Psychosocial Department (0161) 701 5683/4514

Monday to Friday, 9.00 am to 5.00 pm

Violence, Aggression and Harassment Control Policy

We are committed to the well-being and safety of our patients and of our staff. Please treat other patients and staff with the courtesy and respect that you expect to receive. Verbal abuse, harassment and physical violence are unacceptable and will lead to prosecutions.

Comments, Complaints, Concerns & Compliments

If you would like to provide feedback you can:

- Ask to speak to the ward or department manager.
- Write to us: Patient Advice and Liaison Services, 1st Floor, Cobbett House, Manchester Royal Infirmary, Oxford Road, Manchester M13 9WL
- Log onto the Patient Opinion website www.patientopinion.org.uk/ – click on 'Tell Your Story'

If you would like to discuss a concern or make a complaint:

- Ask to speak to the ward or department manager they may be able to help straight away.
- Inpatients can speak to a senior nurse or manager by contacting the Tell Us Today service on (0161) 701 1999.
- Contact our Patient Advice and Liaison Service (PALS) Tel: (0161) 276 8686 e-mail: pals@mft.nhs.uk. Ask for our information leaflet.

We welcome your feedback so we can continue to improve our services.

Please use this space to write down any questions or concerns you may have.

No Smoking Policy

Please protect our patients, visitors and staff by adhering to our no smoking policy. Smoking is not permitted in any of our hospital buildings or grounds, except in the dedicated smoking shelters in the grounds of our Hospital site.

For advice and support on how to give up smoking, go to www.nhs.uk/smokefree.

Translation and Interpretation Service

It is our policy that family, relatives or friends cannot interpret for patients. Should you require an interpreter ask a member of staff to arrange it for you.

تنص سياستنا على عدم السماح لافر اد عائلة المرضى او اقاربهم او اصدقائهم بالترجمة لهم. اذا احتجت الى مترجم فيرجى ان تطلب ذلك من احد العاملين ليرتب لك ذلك.

ہماری یہ پالیسی ہے کہ خاندان ، رشتہ دار اور دوست مریضوں کےلئے ترجمہ نہیں کرسکتے۔ اگر آپ کومترجم کی ضرورت ہےتو عملے کےکسی رُکن سے کہیں کہ وہ آپ کےلئے اس کا ہندوبست کردے۔

ইহা আমাদের নীতি যে, একজন রোগীর জন্য তার পরিবারের সদস্য, আত্মীয় বা কোন বন্ধু অনুবাদক হতে পারবেন না। আপনার একজন অনুবাদকের প্রয়োজন হলে তা একজন কর্মচারীকে জানান অনুবাদকের ব্যবস্থা করার জন্য।

Nasze zasady nie pozwalają na korzystanie z pomocy członków rodzin pacjentów, ich przyjaciół lub ich krewnych jako tłumaczy. Jeśli potrzebują Państwo tłumacza, prosimy o kontakt z członkiem personelu, który zorganizuje go dla Państwa.

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我们的方针是,家属,亲戚和朋友不能为病人做口译。如果您需要口译员,请叫员工给您安排。







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